



Health Behaviours and Improvement Services

This data pack is part of the 2017 Wiltshire Health and Wellbeing Joint Strategic Needs Assessment and is the third of 5 data packs. A number of indicators are presented. Comparisons have been drawn to England, the South West and Wiltshire's statistical neighbours. Trend analyses have been provided when appropriate. Gender, Age and Deprivation analyses are provided whenever possible. This data pack will cover the following areas with over 30 indicators:

Exercise, diet and weight management

Maternity

Sexual Health

Alcohol

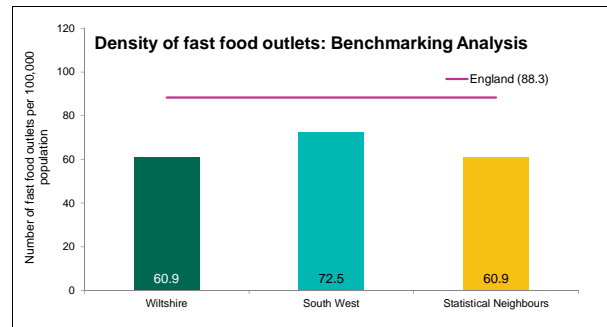
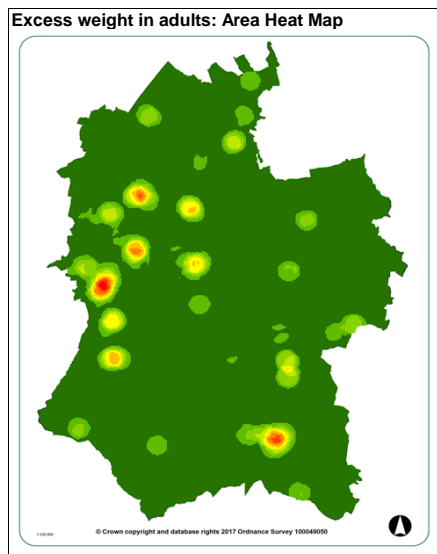
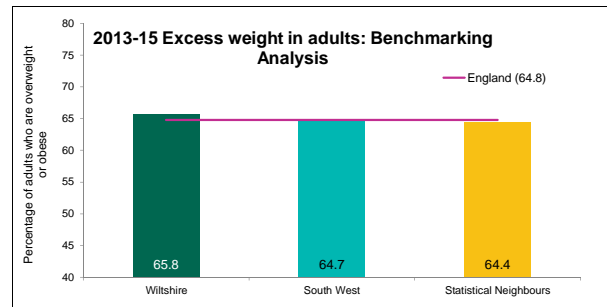
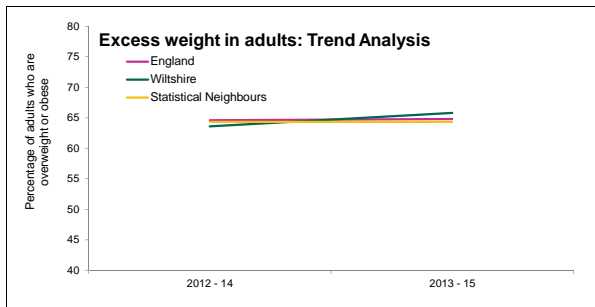
Drug misuse

Smoking

End of life care

Excess Weight in Adults

Obesity is a major determinant of premature mortality and ill health and one of the government's priority areas for health improvement. Wiltshire Council runs the Active Health programme to support action on obesity by enabling GPs to refer patients to a health centre for an activity of their choice. Further information and advice on weight management can be found on the Healthy Weight 4 Life e-toolkit: <http://www.wiltshire.gov.uk/public-health-weight>

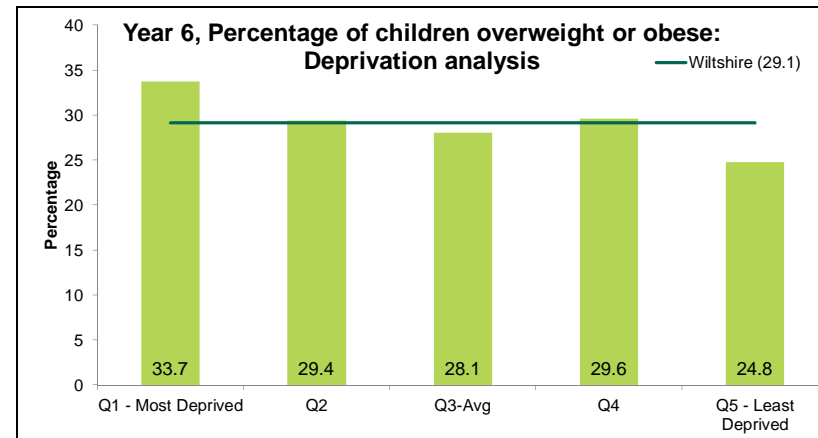
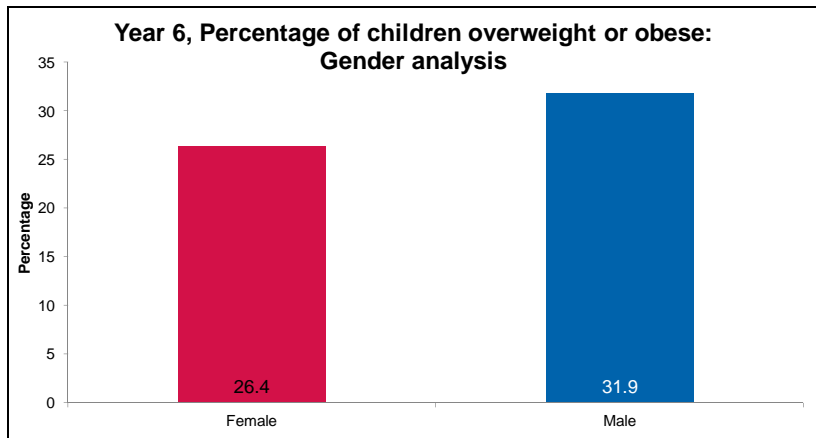
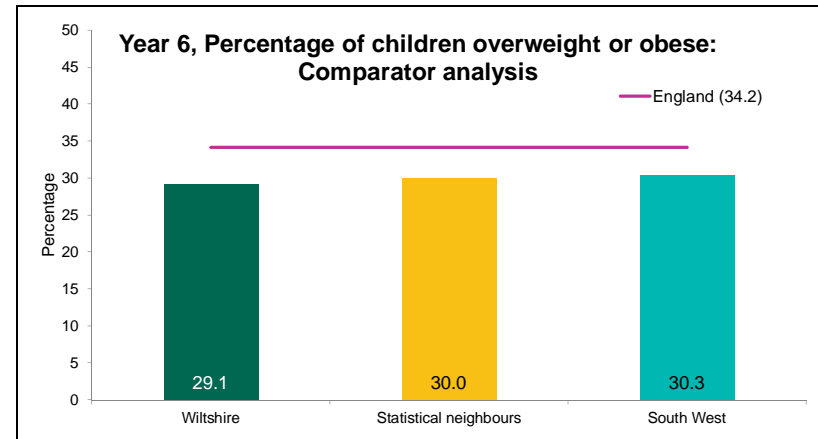
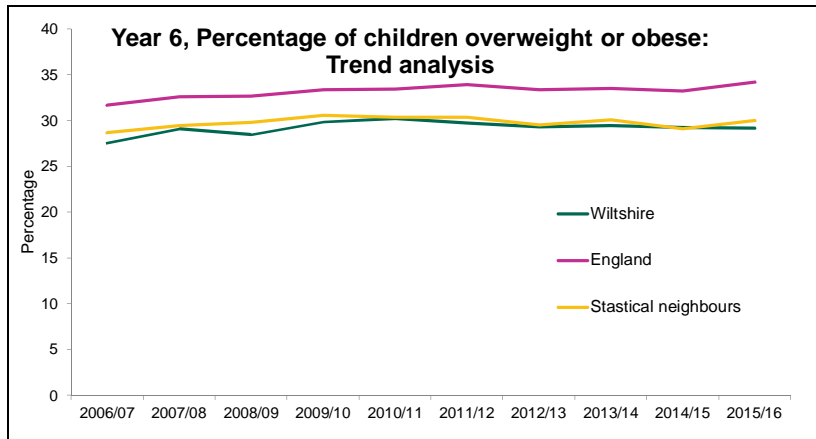


Adults are defined as overweight (including obese) if their body mass index is greater than or equal to 25kg/m². In Wiltshire it is estimated that 65.8% of adults are in this category, which is a slightly higher proportion than in our comparator areas. Wiltshire has a lower density of fast food outlets than England and the South West, with 60.9 outlets per 100,000 population, the same rate as that of our statistical neighbours.

Public Health England, Public Health Outcomes Framework, indicator 2.12; MOSAIC Grand Index, Households with above average likelihood of identifying as overweight (FGKN); Public Health England, Density of Fast Food Outlets in England, © Crown copyright 2016. All rights reserved. Licence number 10034829

Overweight and Obese Year 6 children

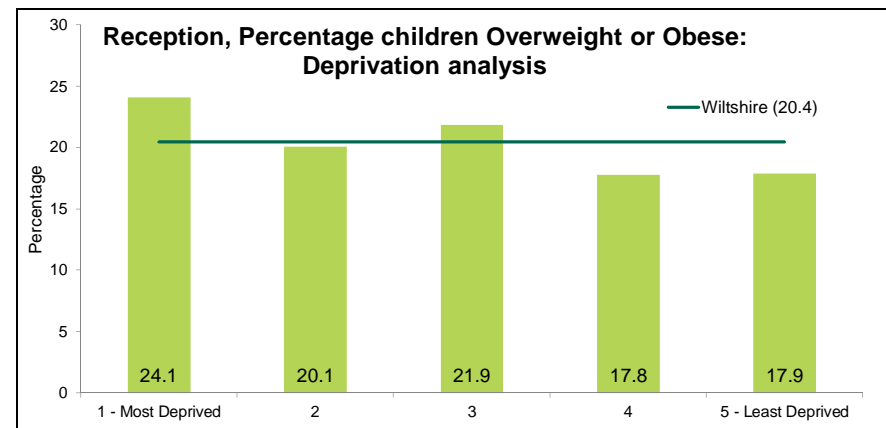
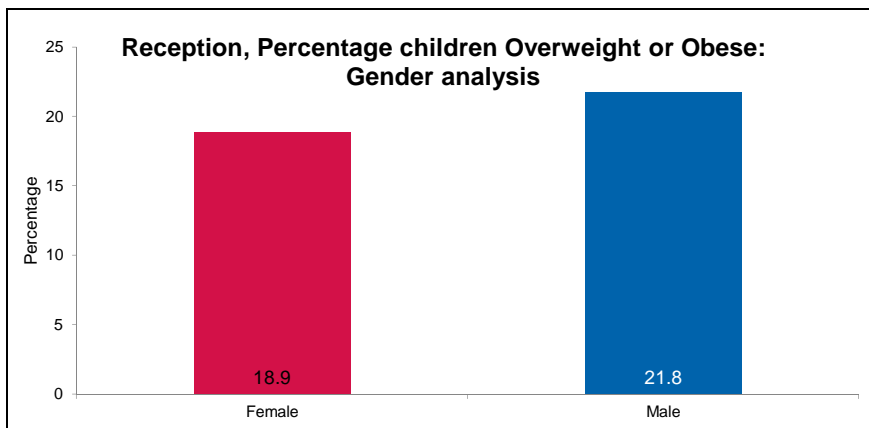
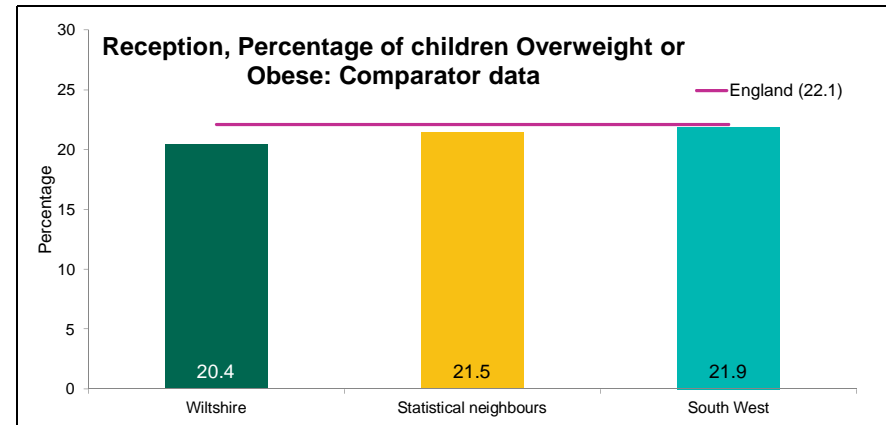
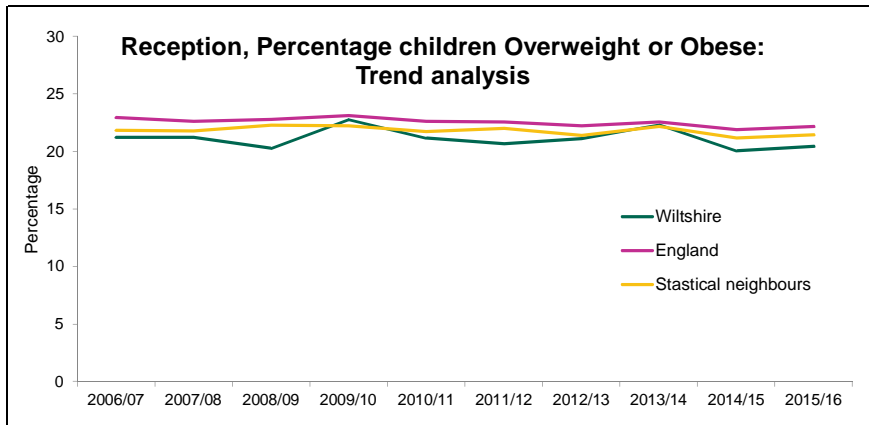
The consequences of excess weight are well documented. People who are overweight and obese have an increased risk of developing a range of chronic diseases that can have a significant impact on health, including, increased risk of type 2 diabetes, hypertension, cardiovascular disease, kidney and liver disease, lower quality of life and psychological problems such as social isolation, low self-esteem, teasing and bullying.



Wiltshire has a lower percentage of overweight and obese year 6 children than England and a similar percentage to the South West and its statistical neighbours. This has been true for many years. Males have a higher percentage of overweight and obese year 6 children than females. Deprivation analysis has shown that areas with high deprivation have higher percentages of obese and overweight children than areas with low levels of deprivation.

Overweight and Obese Reception year children

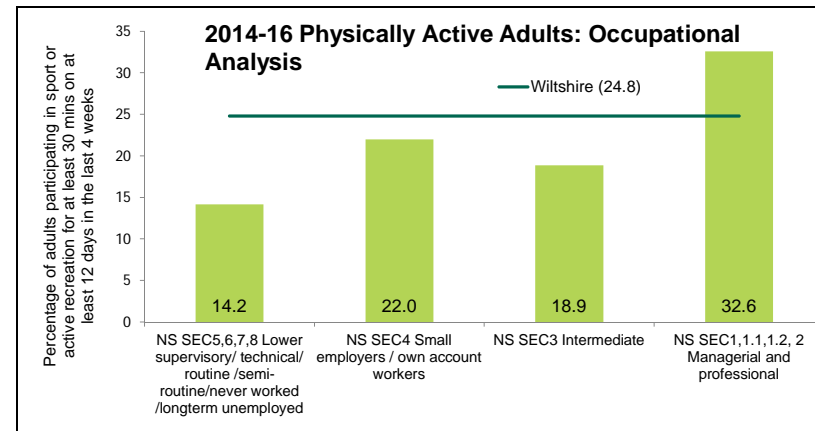
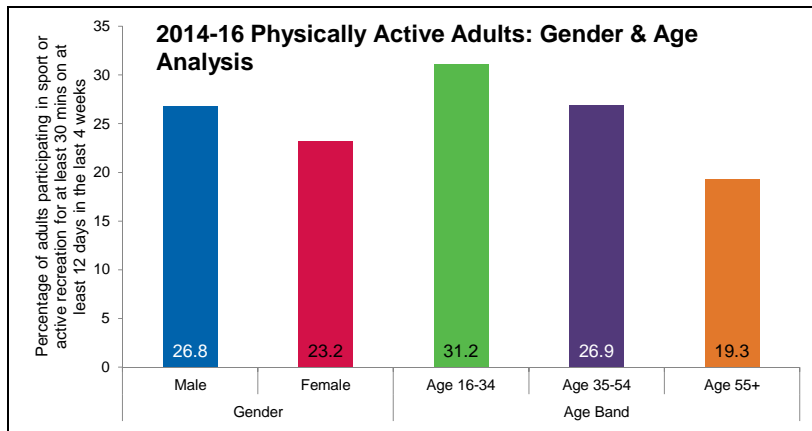
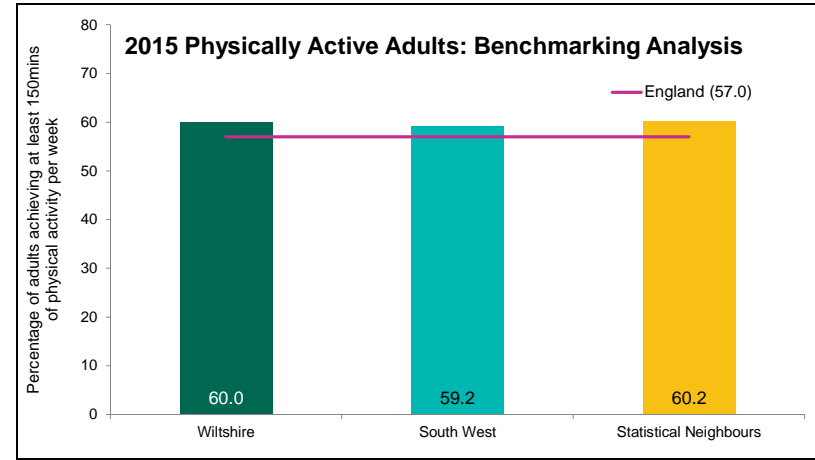
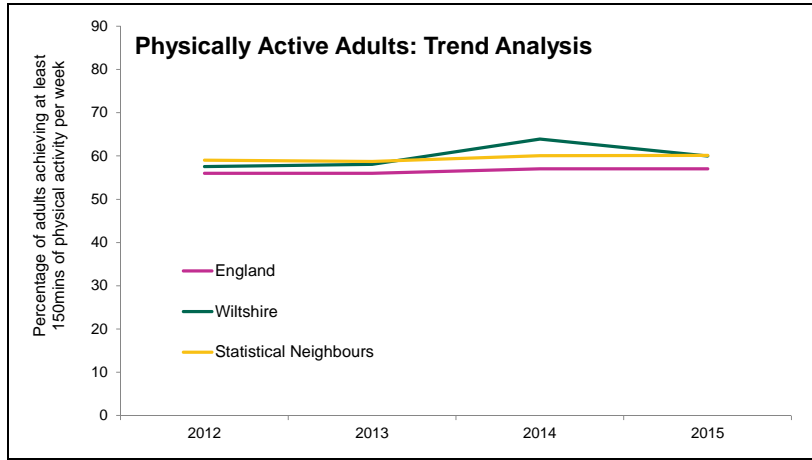
The consequences of excess weight are well documented. People who are overweight and obese have an increased risk of developing a range of chronic diseases that can have a significant impact on health, including, increased risk of type 2 diabetes, hypertension, cardiovascular disease, kidney and liver disease, lower quality of life and psychological problems such as social isolation, low self-esteem, teasing and bullying.



Wiltshire has a lower percentage of overweight and obese reception year children than England, the South West and it's statistical neighbours. This has been true for many years. Males have a slightly higher percentage of overweight and obese reception year children than females. Deprivation analysis has shown that areas with high deprivation have higher percentages of obese and overweight children than areas with low levels of deprivation.

Physically Active Adults

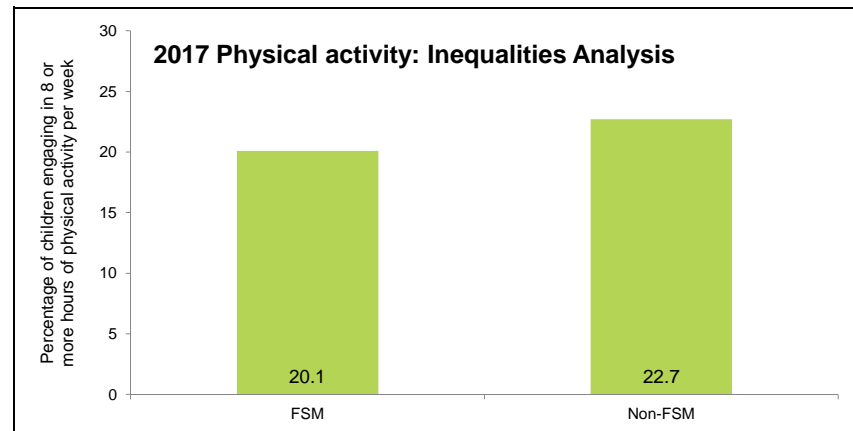
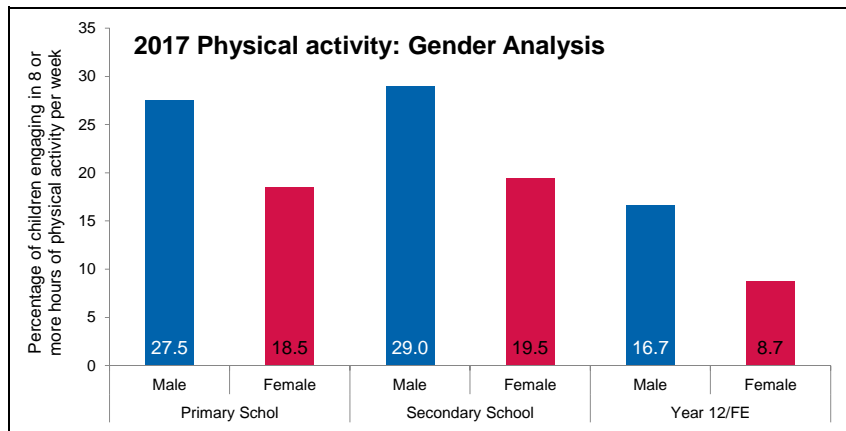
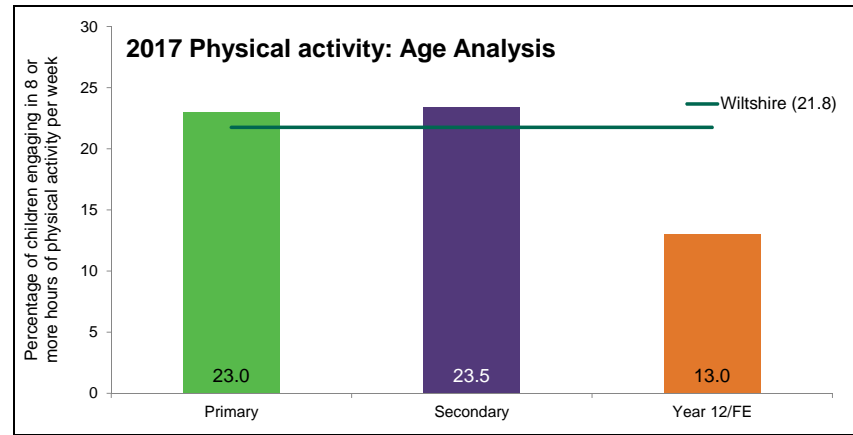
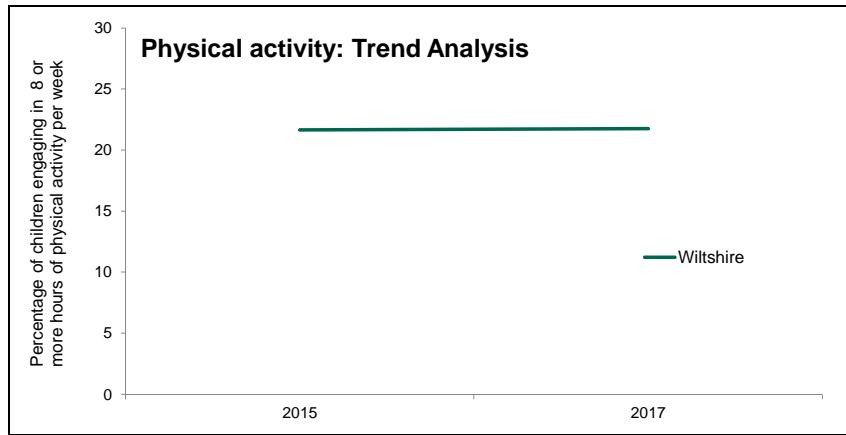
Physical activity can help to control weight and reduces the risk of a range of health conditions including cardiovascular disease and type 2 diabetes, and can significantly improve mental health and wellbeing. The UK Chief Medical Officers recommend adults aged 16+ have at least 150 minutes of physical activity per week.



60% of adults aged 16+ in Wiltshire met the CMO guidance of 150 minutes of physical activity per week in 2015. This is higher than the percentage in England as a whole (57%) and close to that of the South West and our statistical neighbours. Subsidiary analysis of the percentage of adults participating in sport or active recreation for at least 30 minutes on at least 12 days in the previous 4 weeks shows the highest levels of activity were among younger people and those in managerial and professional occupations.

Physical Activity - Children and Young People

Physical inactivity is the 4th leading risk factor for global mortality accounting for 6% of deaths globally. Regular physical activity is also associated with a reduced risk of diabetes, obesity, osteoporosis and colon/breast cancer and with improved mental health. The national physical activity guidelines suggest at least 60 minutes a day which 22% of children in England aged between 5 – 15 currently meet (Health Survey for England 2015).

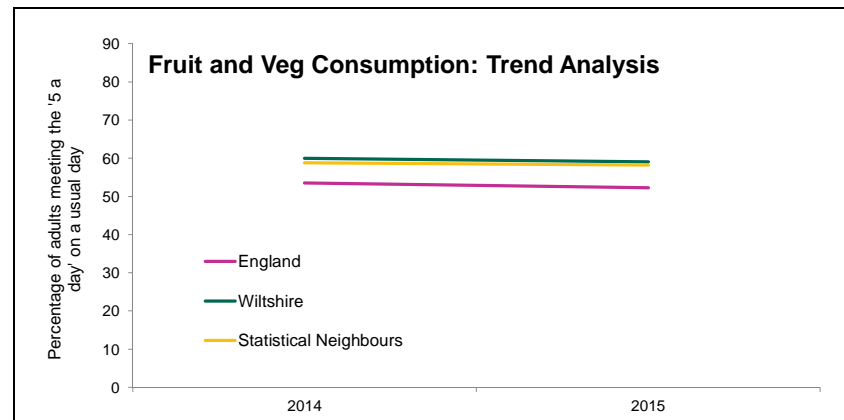
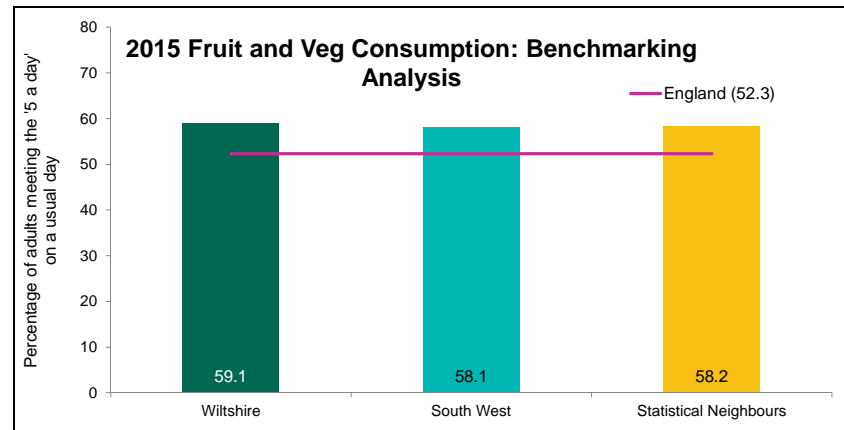
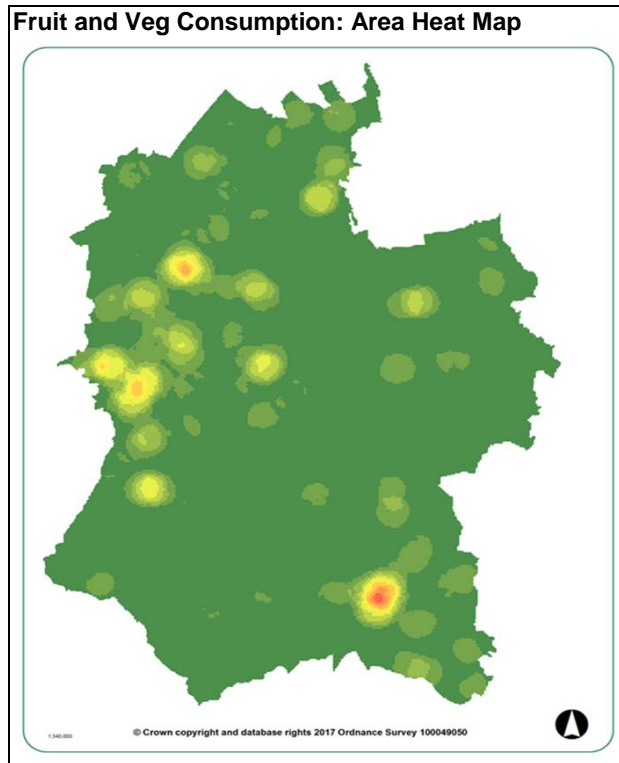


In Wiltshire 23% of primary school children and 23.5% of secondary school children are estimated to undertake 8 or more hours of physical activity a week. But only 13% of the year 12/further education survey respondents managed 8 or more hours of physical activity. The proportion of females managing 8 or more hours of physical activity a week is lower than the proportion of males for each school phase.

The Wiltshire Children and Young People's Health and Wellbeing Survey 2015 and 2017

Consumption of Fruits and Vegetables

Poor diet is a public health issue as it increases the risk of some cancers and cardiovascular disease (CVD), both of which are major causes of premature death. These diseases, and type II diabetes (which increases CVD risk) are associated with obesity, which has a very high prevalence in England. The costs of diet related chronic diseases to the NHS and more broadly to society are considerable. Poor diet is estimated to account for about one third of all deaths from cancer and CVD.

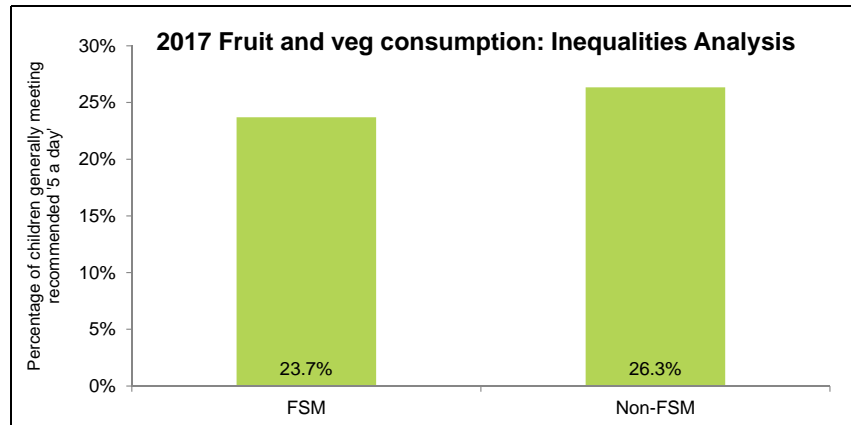
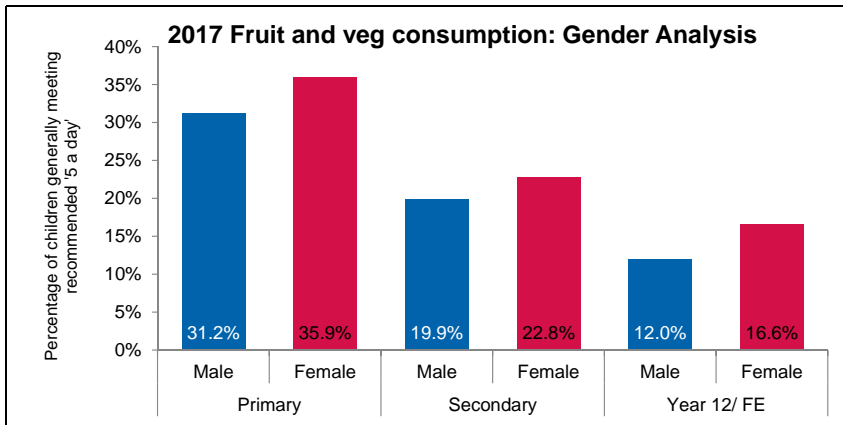
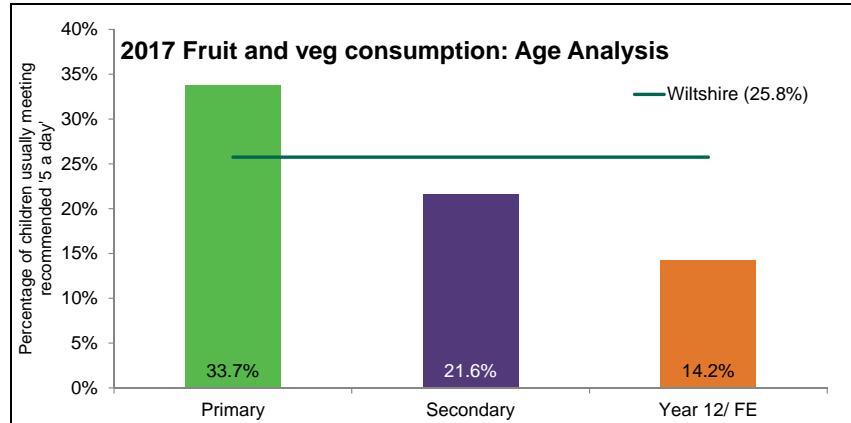
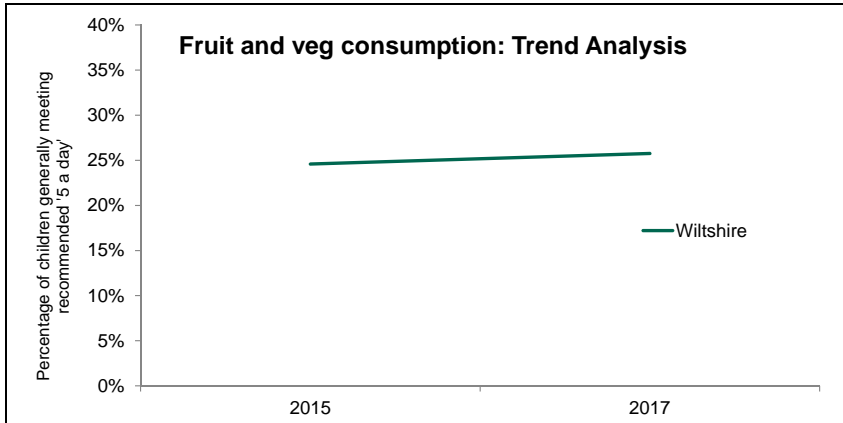


59.1% of adults aged 16+ in Wiltshire met the recommended five portions of fruit and vegetables a day in 2015. This is higher than the England average (52.3%) and close to that of the South West and our statistical neighbours. There is variation in consumption levels within Wiltshire, with more affluent households more likely to be meeting the recommended '5 a day'.

Public Health England, Public Health Outcomes Framework, indicator 2.11i; MOSAIC Grand Index, Households with above average likelihood of meeting the recommended '5 a day' (ABCF).

Fruit and Veg Consumption - Children and Young People

Poor diet is a public health issue as it increases the risk of some cancers and cardiovascular disease (CVD), both of which are major causes of premature death. These diseases, and type II diabetes (which increases CVD risk) are associated with obesity, which has a very high prevalence in England. The costs of diet related chronic diseases to the NHS and more broadly to society are considerable. Poor diet is estimated to account for about one third of all deaths from cancer and CVD.

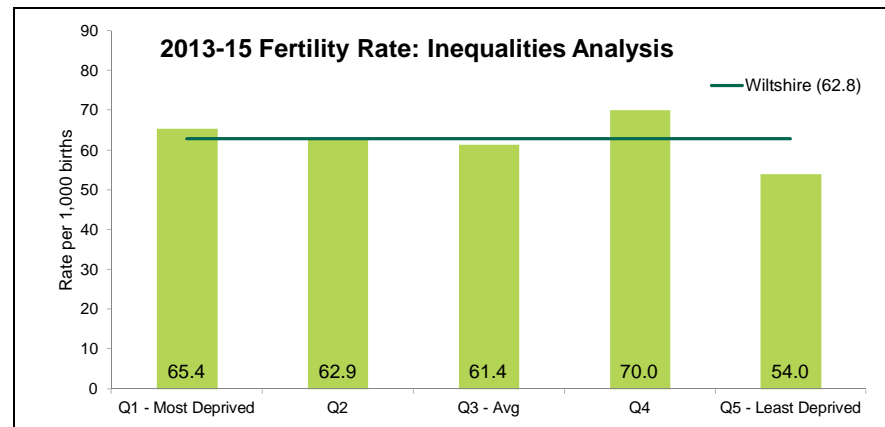
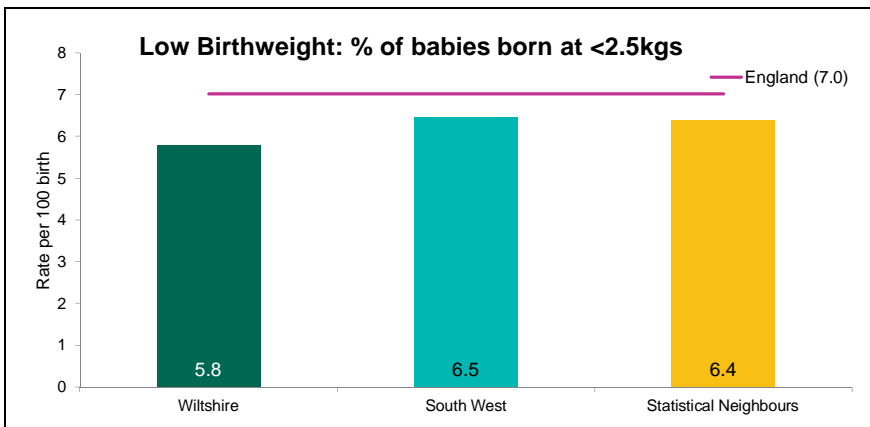
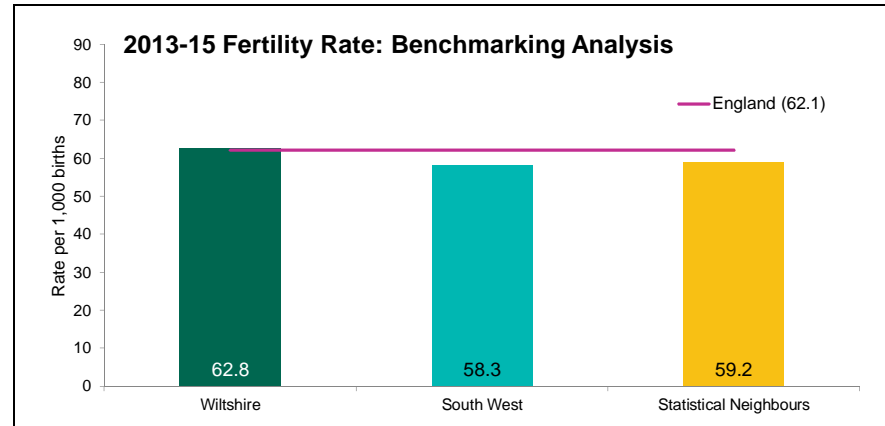
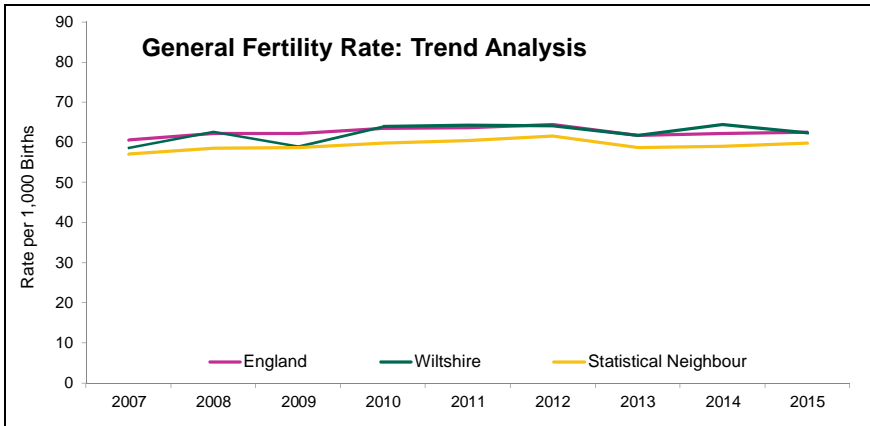


The proportion of respondents who eat 5 fruits and vegetables a day falls with school phase. 33.7% of primary school children, 21.6% of secondary school children and 14.2% of year 12/ further education students eat 5 or more fruits and vegetables a day. A higher percentage of females managed to eat the recommended number of fruits and vegetables than males. The percentage of pupils in receipt of free school meals who reported eating the recommended number of fruits and vegetables was lower than those not in receipt of free school meals.

The Wiltshire Children and Young People's Health and Wellbeing Survey 2015 and 2017

General Fertility Rate & Low Birth Weight

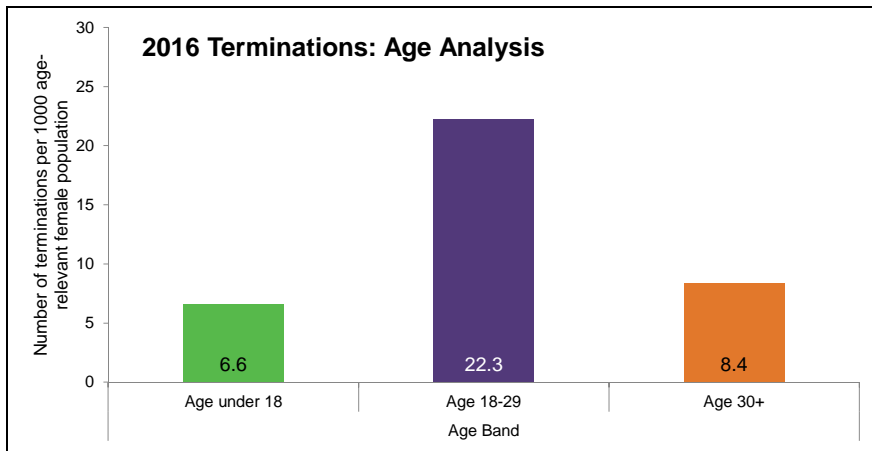
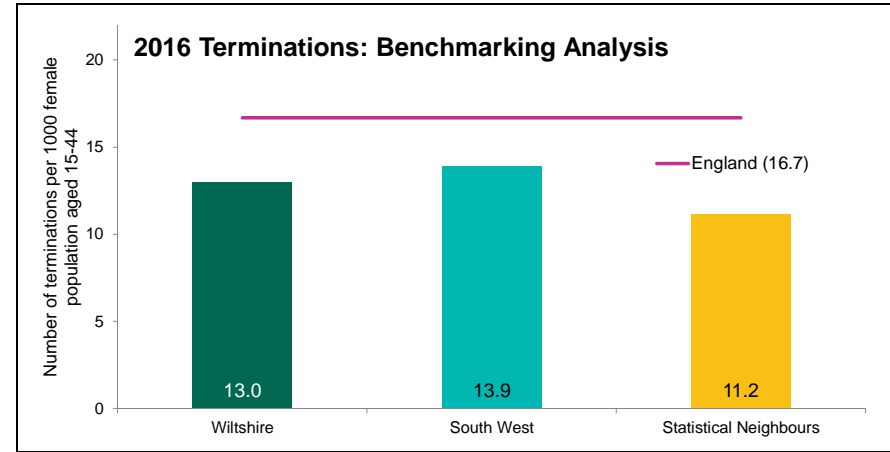
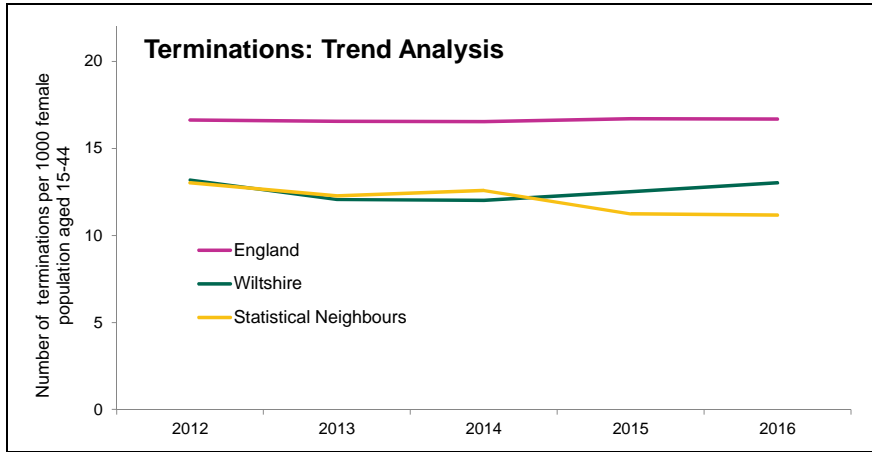
Pregnancy and early life can help lay the foundations for individual health, well-being, cognitive development and emotional security not just in later childhood but also in adult life.



There were 5,078 live births to women resident in Wiltshire in 2015. There were 2,607 boys born and 2,471 girls. The total fertility rate is around the England average and slightly higher than our statistical neighbours. Around 6% of births have a weight less than 2.5kgs which is lower than England and our statistical neighbours. The fertility rate is lower in more affluent areas.

Terminations

The Department of Health's 2013 "Framework for Sexual Health Improvement in England" includes the ambition of reducing unwanted pregnancies. Information on abortions can inform the delivery not only of termination services, but of contraception services and advice, outreach and sexual health promotion.

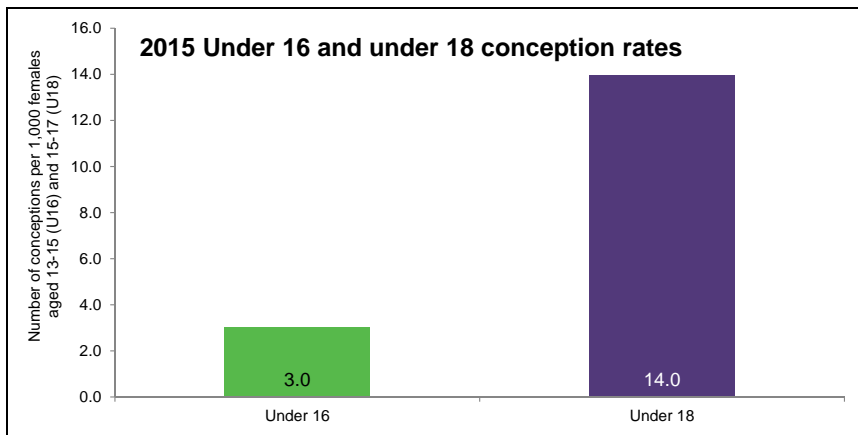
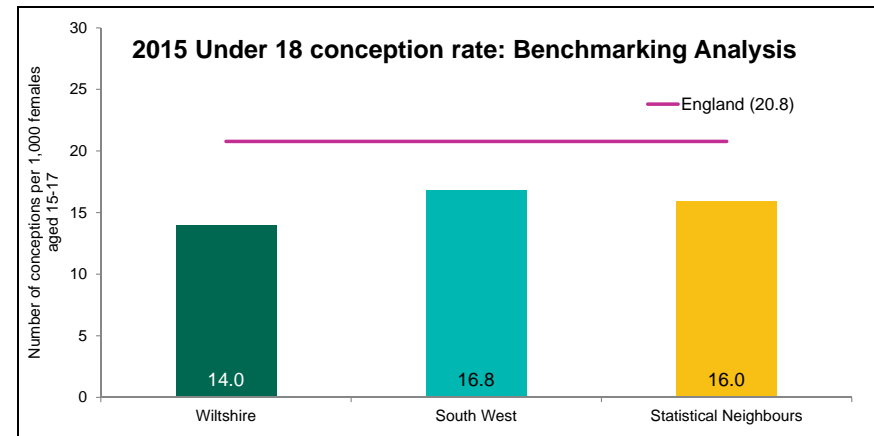
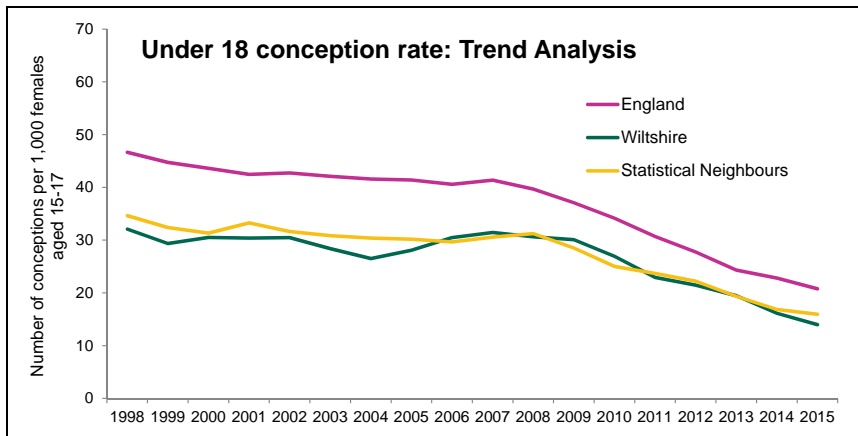


1,060 abortions were carried out in Wiltshire in 2016, equivalent to 13 terminations per 1000 females aged 15-44. This rate is lower than that of England (16.7) and higher than that of our statistical neighbours (11.2). Those aged 18-29 are most likely age group to terminate a pregnancy.

Public Health England, Sexual and Reproductive Health Profiles; Department of Health, 2016 Abortion Statistics, table 10c.

Under 18 Conception Rate

Most teenage pregnancies in England are unplanned and around half end in abortion (Public Health England). Teenage pregnancy is also associated with poorer outcomes both for the young parents and their children. Teenage mothers are more likely to bring up their child in poverty and themselves have a higher risk of poor mental health than older mothers. More information and advice on tackling teenage pregnancy is available here: www.local.gov.uk/good-progress-more-do-teenage-pregnancy-and-young-parents

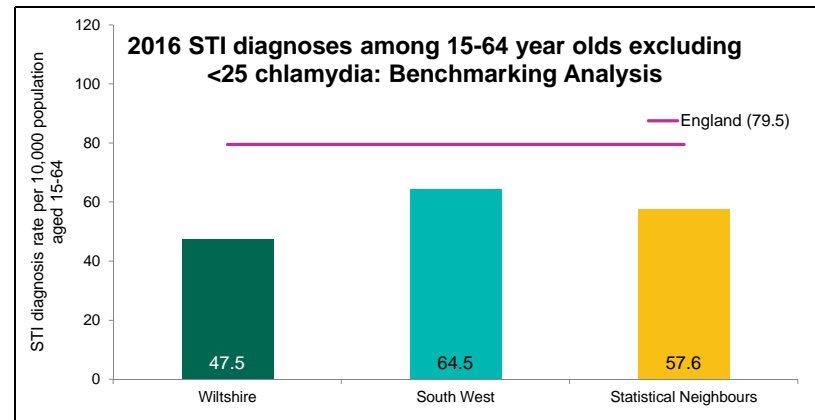
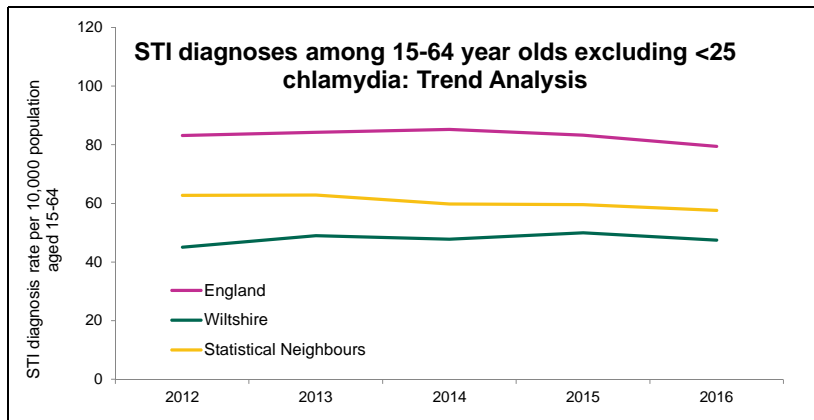
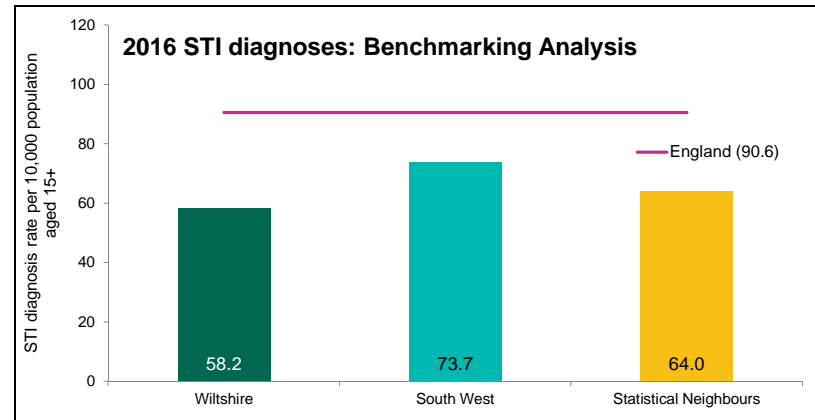
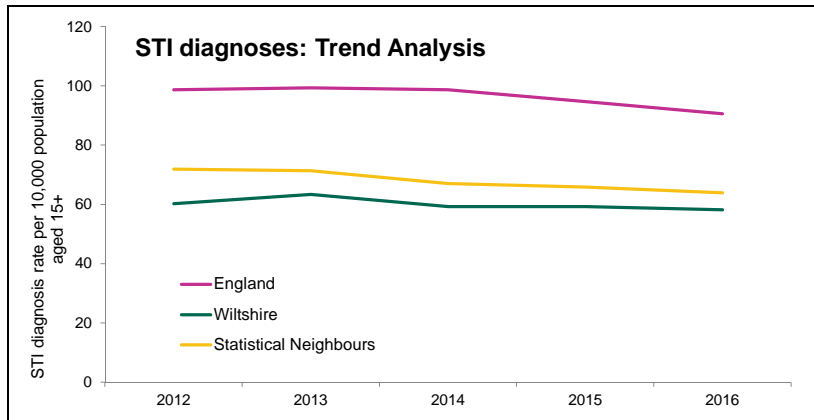


In Wiltshire as nationally, under 18 conception rates have fallen steadily since 2008. There were 125 under 18 conceptions in Wiltshire in 2015, equivalent to 14 conceptions per 1000 females aged 15-17. This is lower than England (20.8), the South West (16.8) and our statistical neighbours (16.0). The under 16 conception rate in Wiltshire has also fallen over time, from 57 under 16 conceptions in 2009 to 25 in 2015. Per 1000 females aged 13-15, this is a decline in the rate from 6.3 in 2009 to 3.0 in 2015.

Public Health England, Public Health Outcomes Framework, indicator 2.04

Sexually Transmitted Infections

Sexual health is a key public health issue, its importance is outlined in the Department of Health's "A Framework for Sexual Health Improvement in England", which is available here: www.gov.uk/government/publications/a-framework-for-sexual-health-improvement-in-england

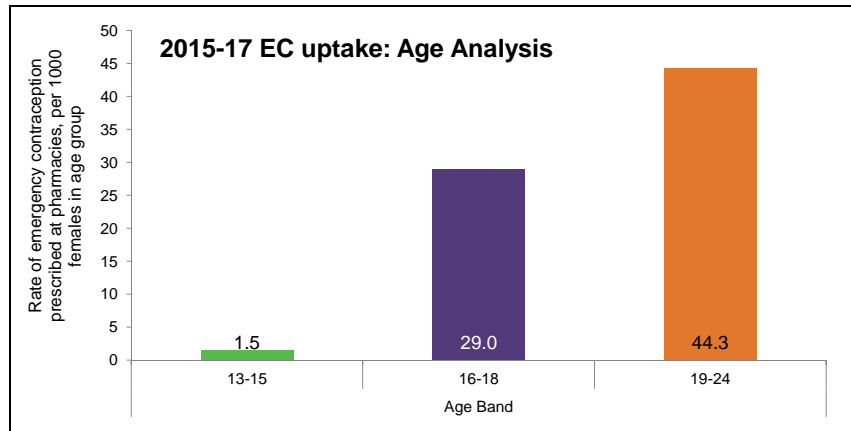
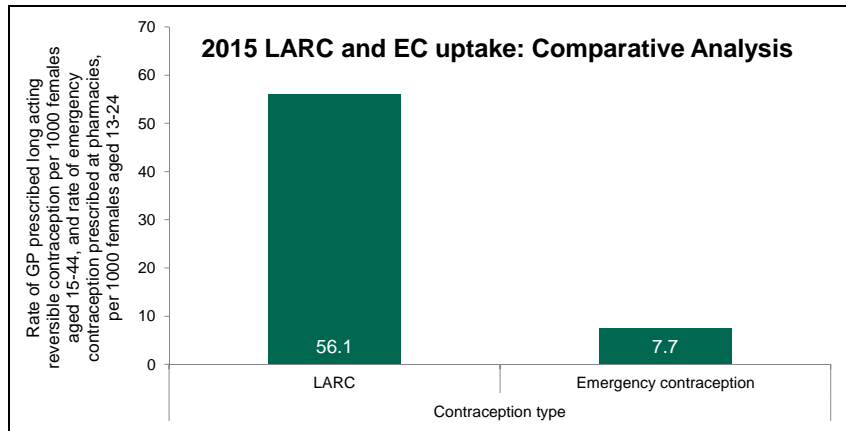
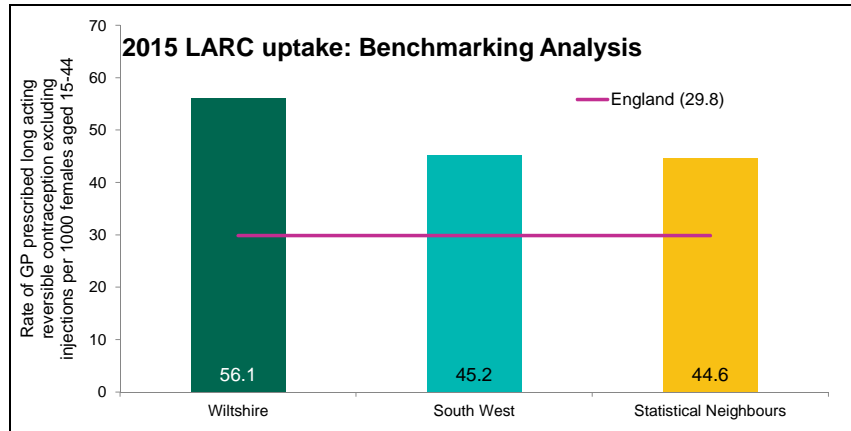
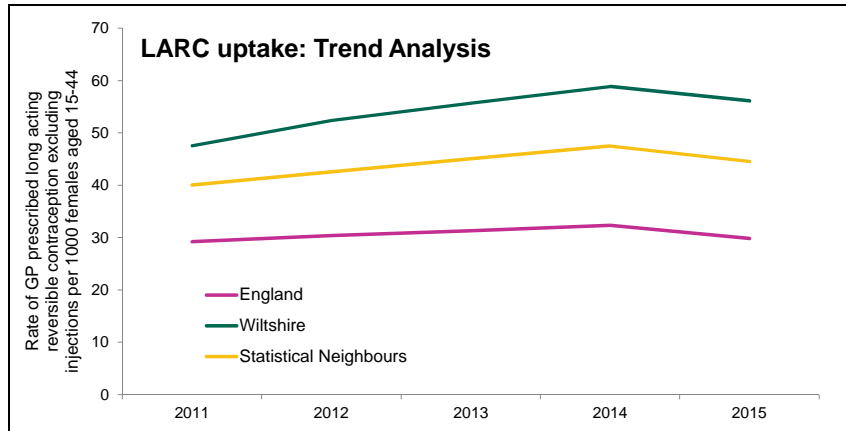


Wiltshire's rate of new diagnoses of sexually transmitted infections (see below for definition) was 58.2 per 10,000 people aged 15+ in 2016, which is lower than that of England (90.6), the South West (73.7) and our statistical neighbours (64). Similarly, Wiltshire's rate excluding chlamydia diagnoses in the <25 population, per 10,000 people aged 15-64, is lower than that of England, the South West and our statistical neighbours.

Public Health England, Sexual Health Profiles. STIs are: chancroid / LGV / donovanosis; chlamydia; gonorrhoea; first episode anogenital herpes; new HIV diagnosis; molluscum contagiosum; non-specific genital infection; pelvic inflammatory disease (PID) & epididymitis: non-specific; scabies / pediculosis pubis; syphilis: primary, secondary & early latent; Trichomoniasis; first episode anogenital warts. In 2015, the new STI diagnoses group was expanded to include: Mycoplasma genitalium; Shigella: flexneri, sonnei and unspecified.

Contraception

Long-acting reversible contraception (LARC) products, such as implants, are highly effective and can remain in place for up to 10 years, depending on the type of product. A high LARC uptake reduces unwanted pregnancies and is more cost-effective than condoms and the pill, as well as being potentially less stressful than emergency contraceptive methods such as the 'morning after pill'.

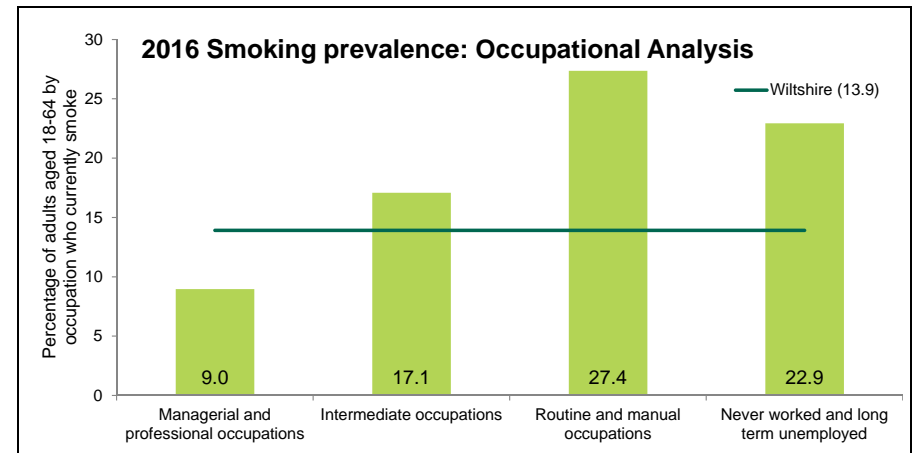
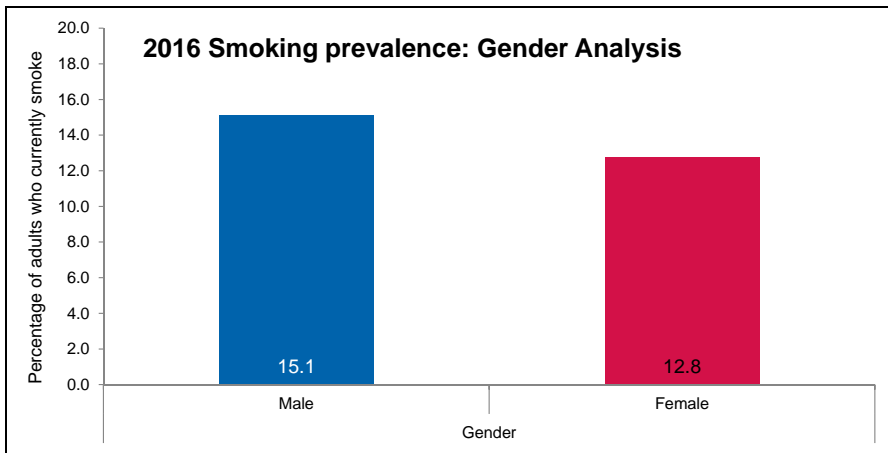
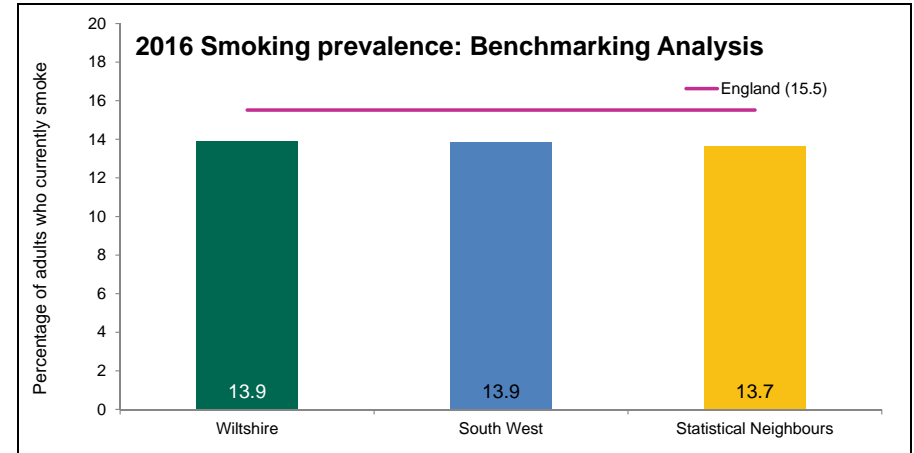
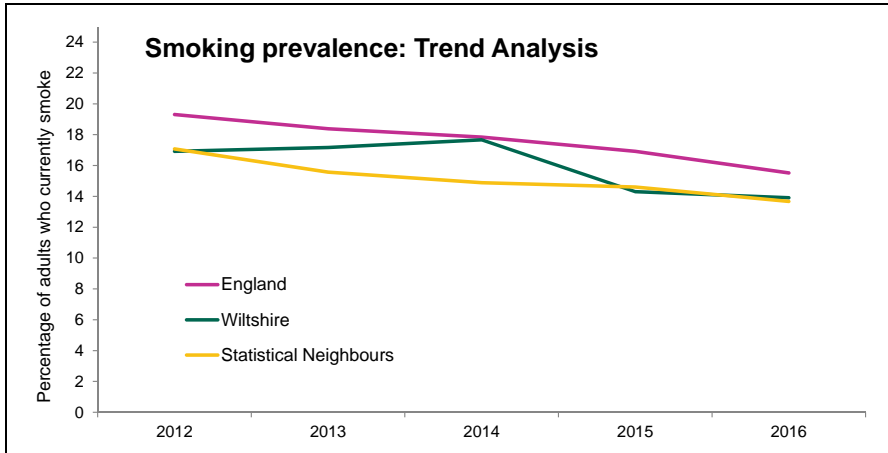


Wiltshire's GP-prescribed LARC uptake (excluding injections) rate was 56.1 per 1000 females aged 15-44 in 2015, which is higher than that of England, the South West and our statistical neighbours, and much higher than the local rate of pharmacy-prescribed emergency contraception (7.7 per 1000 females aged 13-24). The emergency contraception rate, between 2015 and 2017, was highest in the 19-24 year old age group

Public Health England, Sexual & Reproductive Health Profile, GP prescribed long acting reversible contraception (LARC) excluding injections; PharmOutcomes Emergency Contraception 2015-17; ONS 2015 mid-year estimates

Smoking Prevalence in Adults - Current Smokers

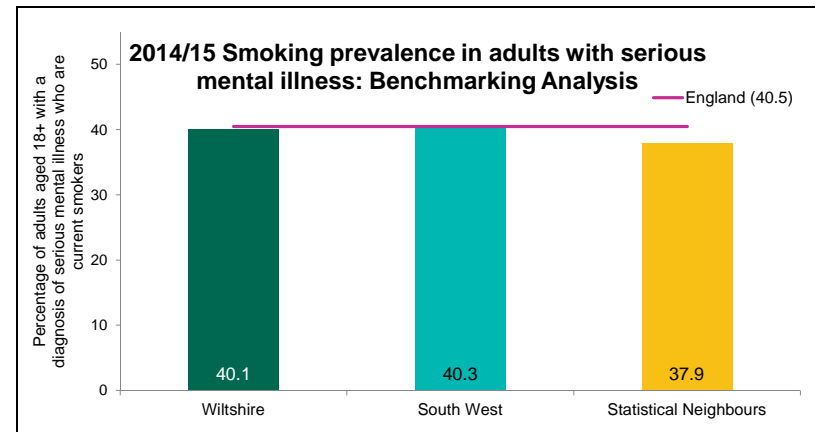
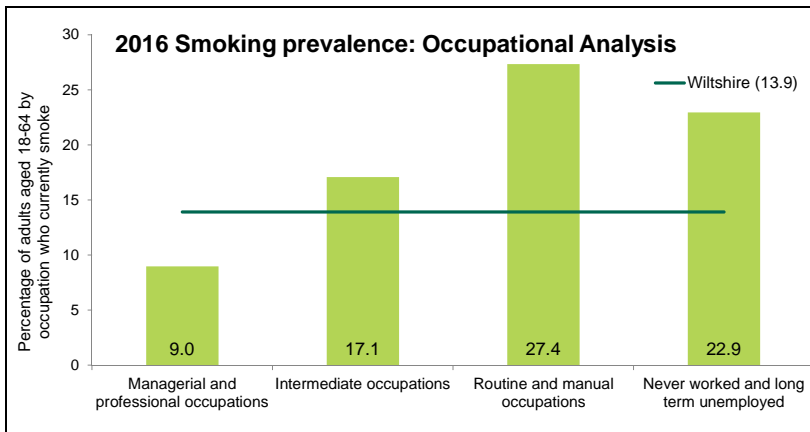
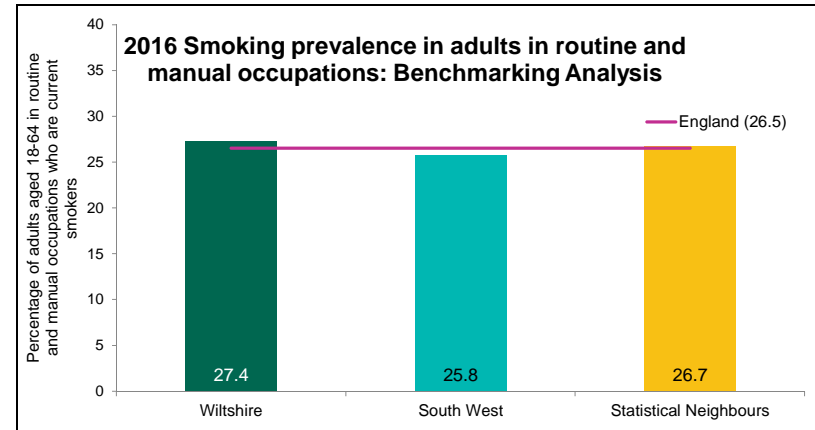
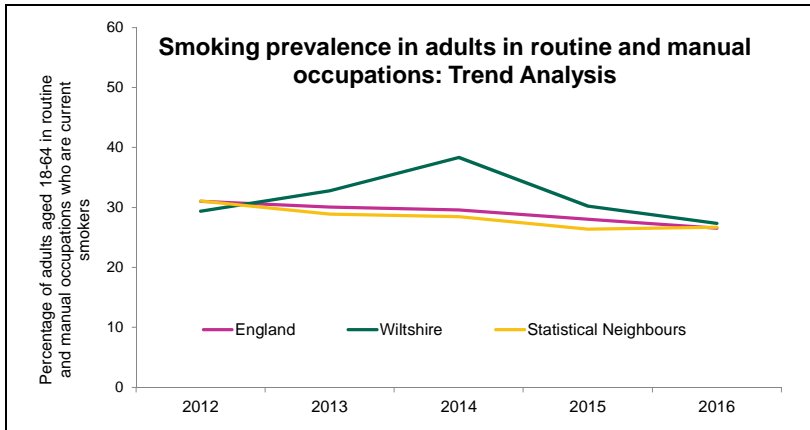
Smoking is the most important cause of preventable ill health and premature mortality in the UK. Smoking is a major risk factor for many diseases, such as lung cancer, chronic obstructive pulmonary disease (COPD) and heart disease. It is also associated with cancers in other organs, including lip, mouth, throat, bladder, kidney, stomach, liver and cervix.



Smoking prevalence has been falling for many years in Wiltshire and in England. Wiltshire has a lower prevalence than England. A higher percentage of males smoke than females. Further, a higher percentage of those with routine and manual occupations and those who have never worked or are in long term unemployment smoke.

Smoking Prevalence in Adults - Occupations and Serious Mental Illness

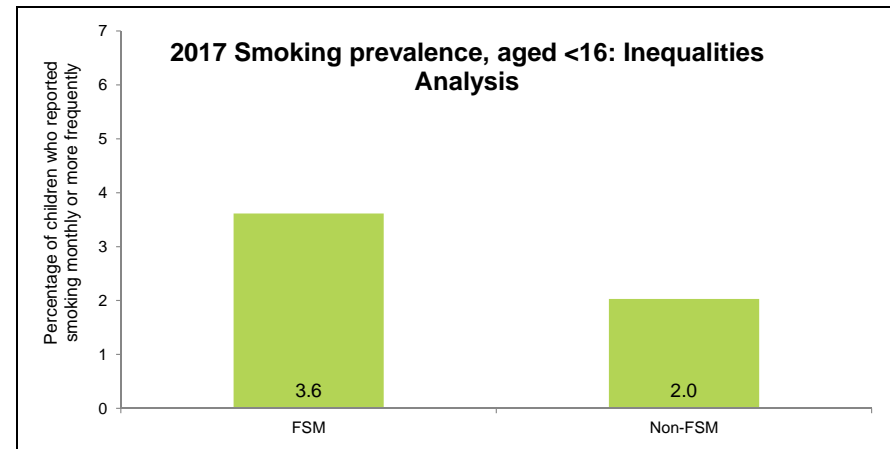
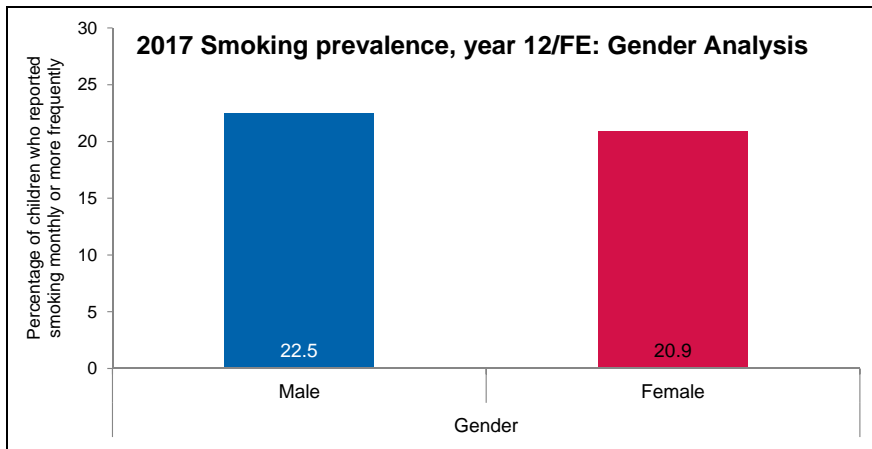
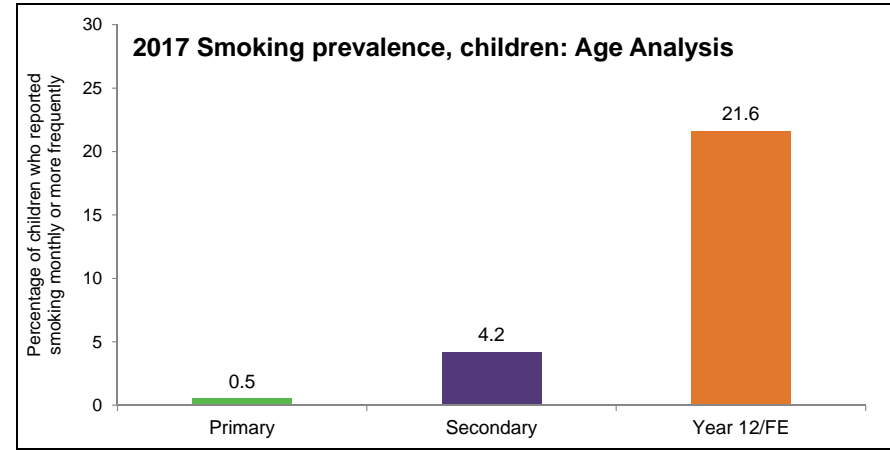
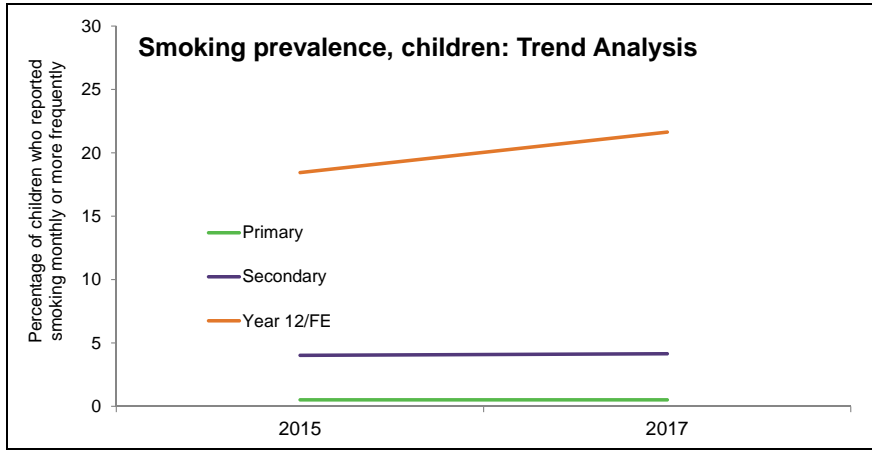
Smoking is the most important cause of preventable ill health and premature mortality in the UK. While 13.9% of Wiltshire's adult population are smokers, this proportion is significantly higher among adults in routine and manual occupations, adults who have never worked or are long-term unemployed, and among adults with a serious mental illness such as schizophrenia.



27.4% of adults in routine and manual occupations currently smoke in Wiltshire, a proportion that is slightly higher than in England (26.5%), the South West (25.8%) and our statistical neighbours (26.7%). 40.1% of adults on GP lists (i.e. not living in an institution) with a serious mental illness such as schizophrenia or bipolar affective disorder smoke - this is close to the proportions in England and the South West, and higher than among our statistical neighbours.

Smoking Prevalence - Children and Young People

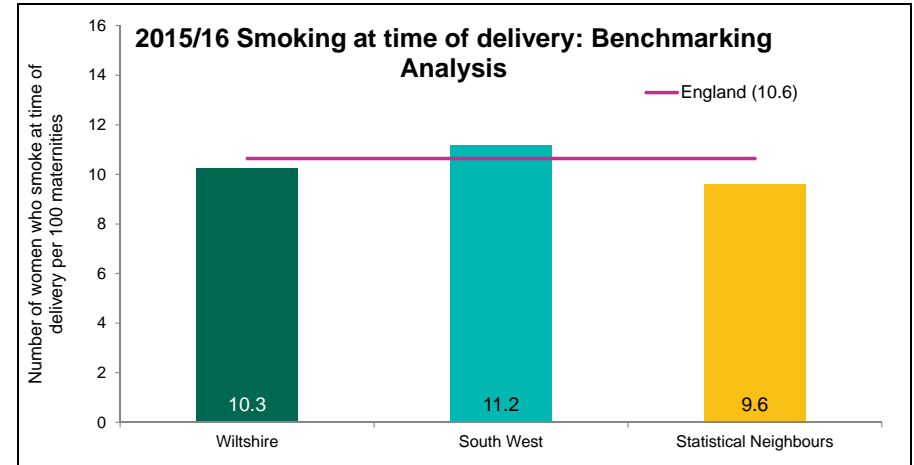
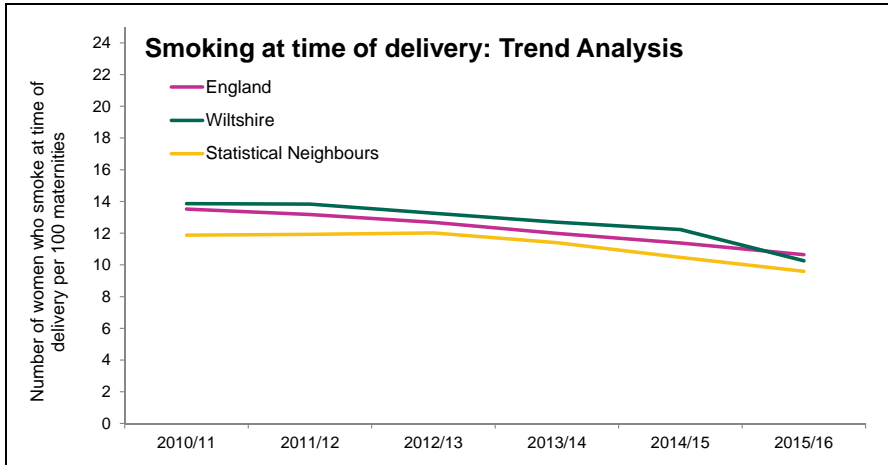
Smoking is a major cause of preventable morbidity and premature death. There is a large body of evidence showing that smoking behaviour in early adulthood affects health behaviours later in life.



A very small percentage of primary school pupils and secondary school pupils reported smoking monthly or more. However, 21.6% of year 12/further education students reported smoking monthly or more frequently. Males in the year 12/FE school phase are slightly more likely to smoke than females. There was a slightly higher percentage of smokers in the children in receipt of free school meals.

Smoking Status at Time of Delivery

Smoking in pregnancy has well known detrimental effects for the growth and development of the baby and health of the mother. On average, smokers have more complications during pregnancy and labour, including bleeding during pregnancy, placental abruption and premature rupture of membranes.

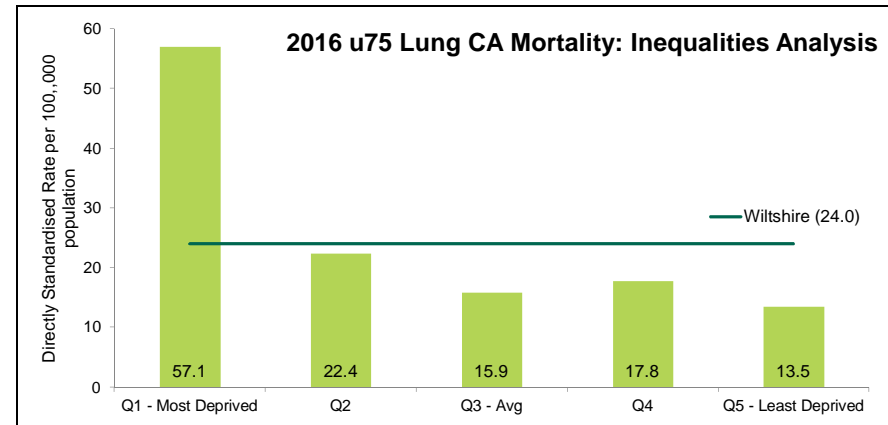
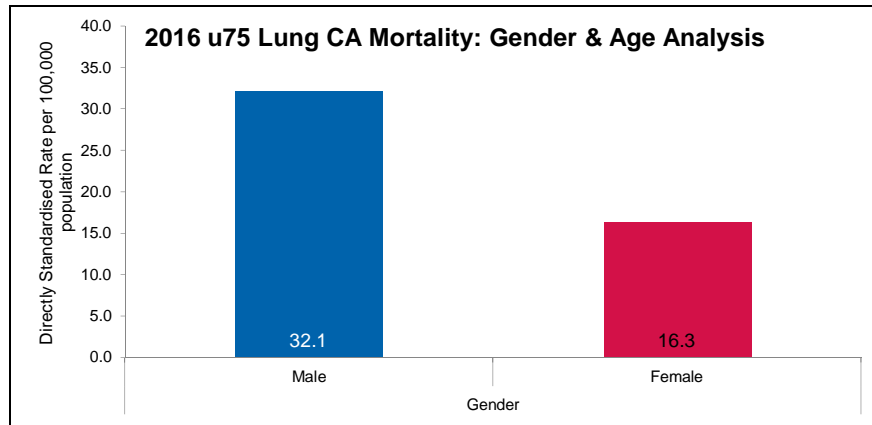
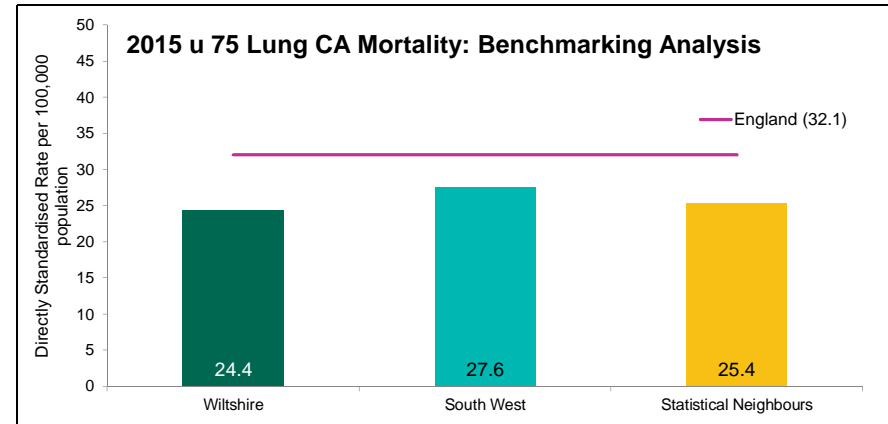
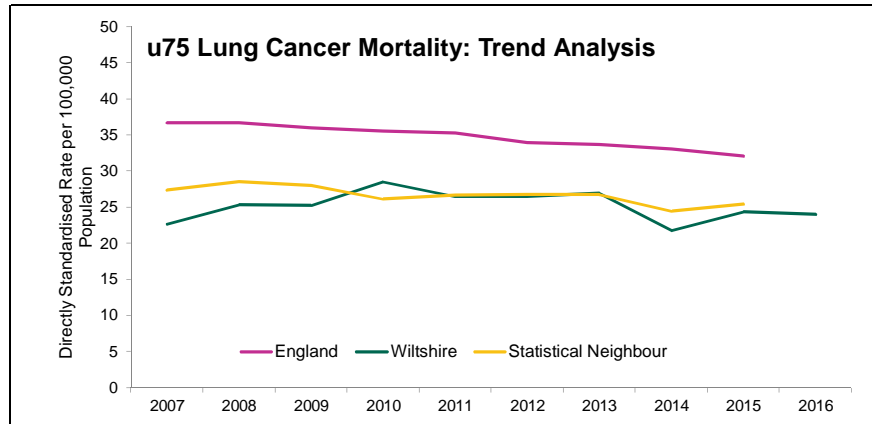


The percentage of women smoking at time of delivery has been falling for many years in Wiltshire and England. Wiltshire has a slightly lower rate than England and the South West but not its statistical neighbours.

Public Health England, Public Health Outcomes Framework, indicator 2.03 (corrected; the 2013/14 Wiltshire figure on PHOF is incorrect, the confirmed actual figure is 12.7% not 18.6%)

Under 75 Lung Cancer Mortality

Lung cancer is one of the most common and serious types of cancer. Around 44,500 people are diagnosed with the condition every year in the UK and in Wiltshire it accounts for 17.8% of all cancer related deaths. Lung cancer mainly affects older people. It's rare in people younger than 40, and the rates of lung cancer rise sharply with age. Lung cancer is most commonly diagnosed in people aged 70-74.

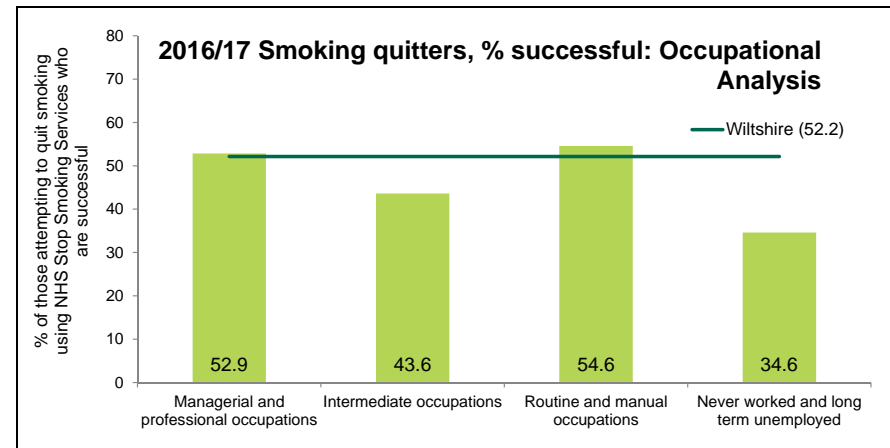
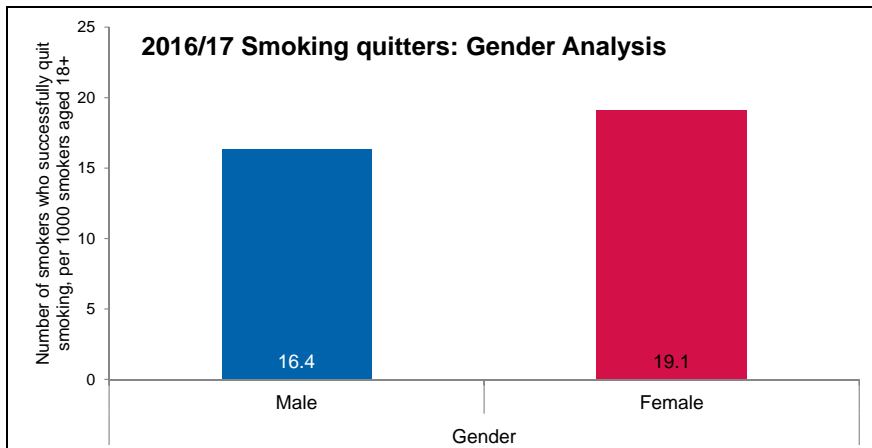
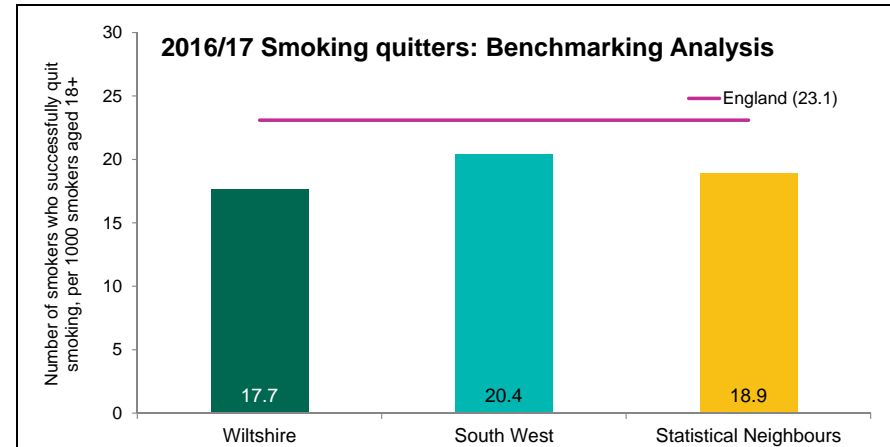
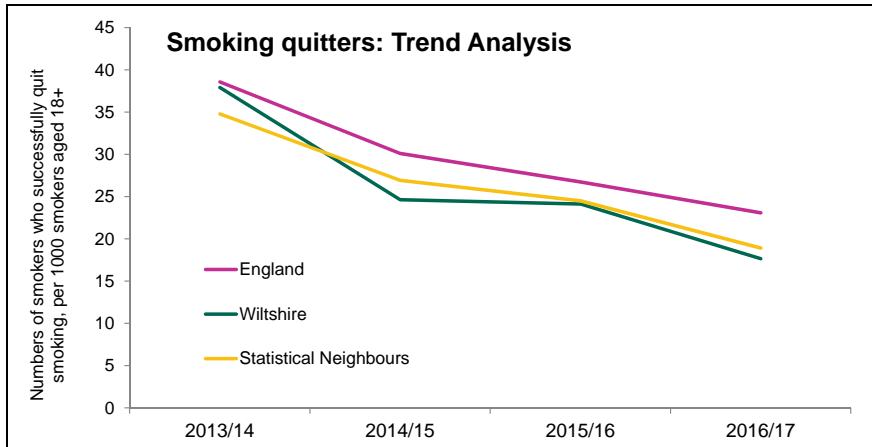


The Wiltshire rate for under 75 Lung Cancer Mortality is lower than the England and South West average and broadly similar to our Statistical Neighbours. Males in Wiltshire have a higher rate than females. Those living in the more deprived areas of Wiltshire have a rate around 3 times higher than those living in other parts of Wiltshire.

ONS Vital Statistics, Primary Care Mortality Database and ONS Population Mid Year Estimates.

Smoking Quitters

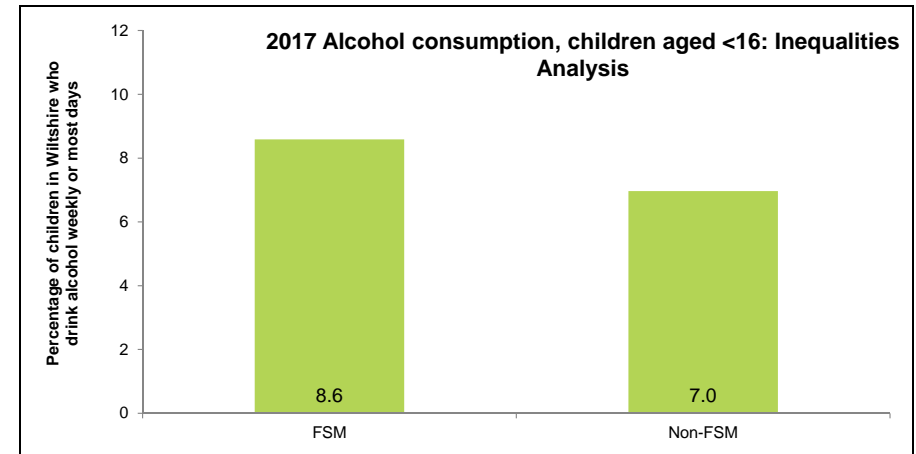
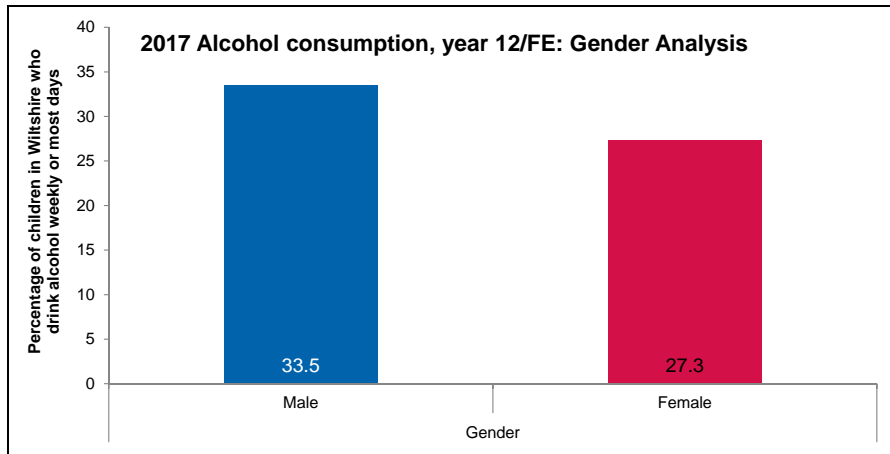
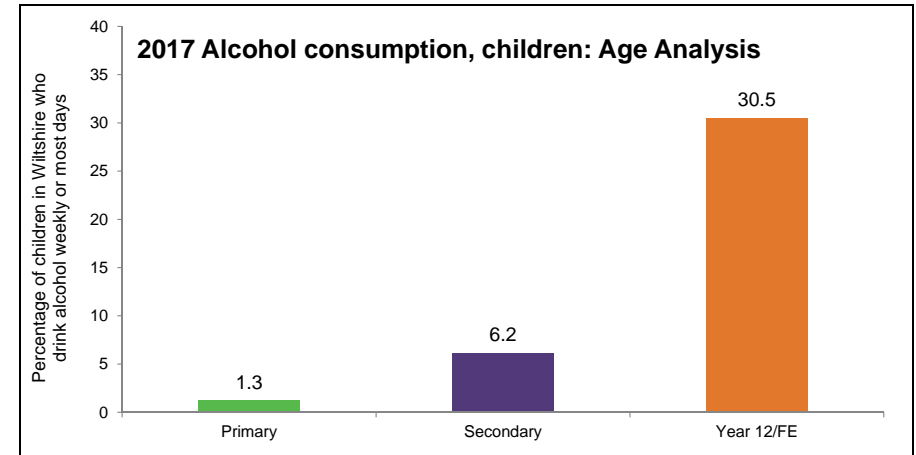
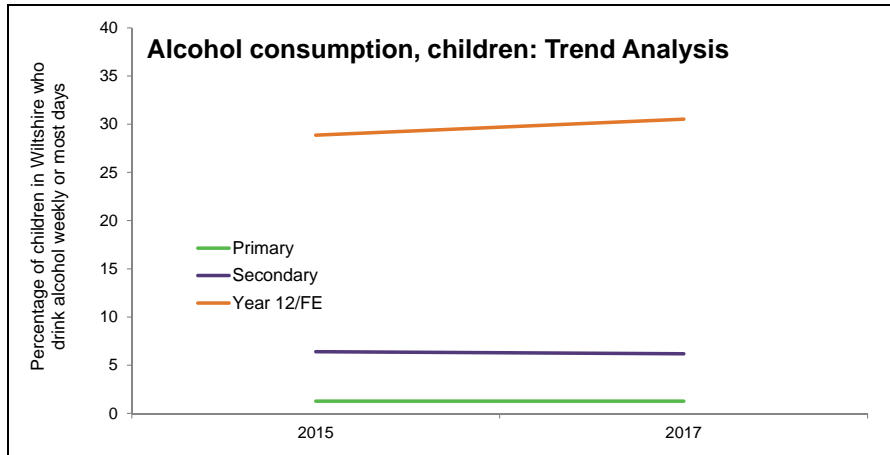
Smoking is the most important cause of preventable ill health and premature mortality in the UK. Smoking is a major risk factor for many diseases, such as lung cancer, chronic obstructive pulmonary disease (COPD) and heart disease. It is also associated with cancers in other organs, including lip, mouth, throat, bladder, kidney, stomach, liver and cervix.



In Wiltshire, England and Wiltshire's statistical neighbours the rate of successful quitters has been falling for a few years. Wiltshire has a lower rate of successful quitters than England and the South West. Males have a lower quit rate than females. Of attempted quitters, those who have never worked and are long term unemployed have a lower successful quit rate than the Wiltshire average along with those in intermediate occupations.

Alcohol Consumption - Children and Young People

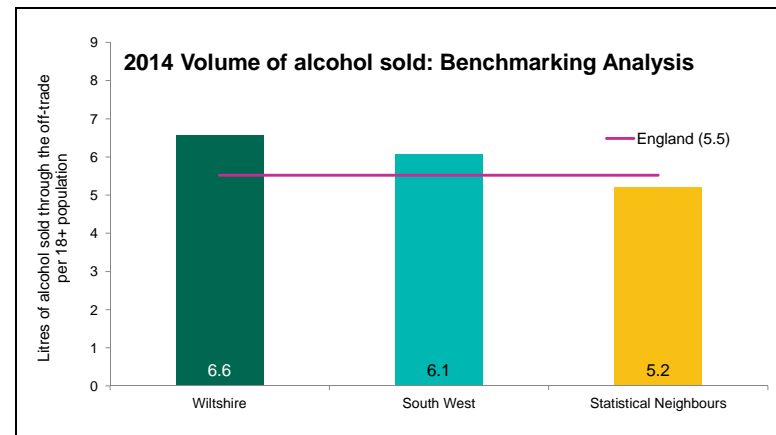
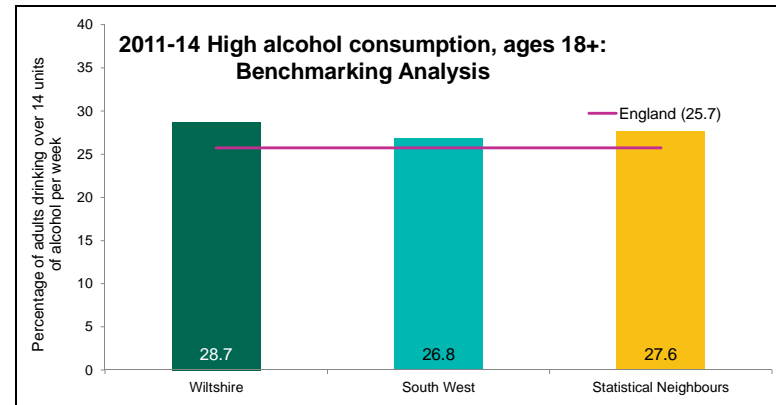
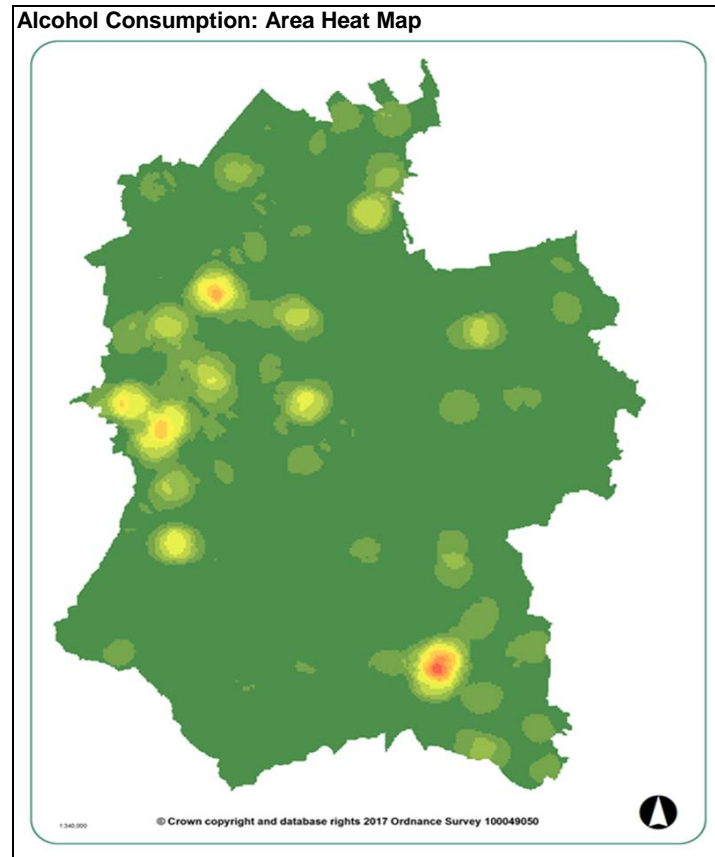
Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually.



Nearly all primary school and secondary school children in Wiltshire reported not drinking weekly or most days. However, nearly a third of year 12/FE students reported drinking alcohol weekly or most days. A higher percentage of the male year 12/FE students drank weekly or more than the female students. A slightly higher percentage of pupils in receipt of free school meals are drinking weekly or most days.

Alcohol Consumption in Adults

Alcohol misuse contributes to ill health and premature mortality, as well as incurring heavy social and financial costs. In January 2016 revised guidance on alcohol consumption was issued by the UK Chief Medical Officers, advising that in order to keep to a low level of risk of alcohol-related harm adults should drink no more than 14 units of alcohol a week. See www.gov.uk/government/publications/alcohol-consumption-advice-on-low-risk-drinking

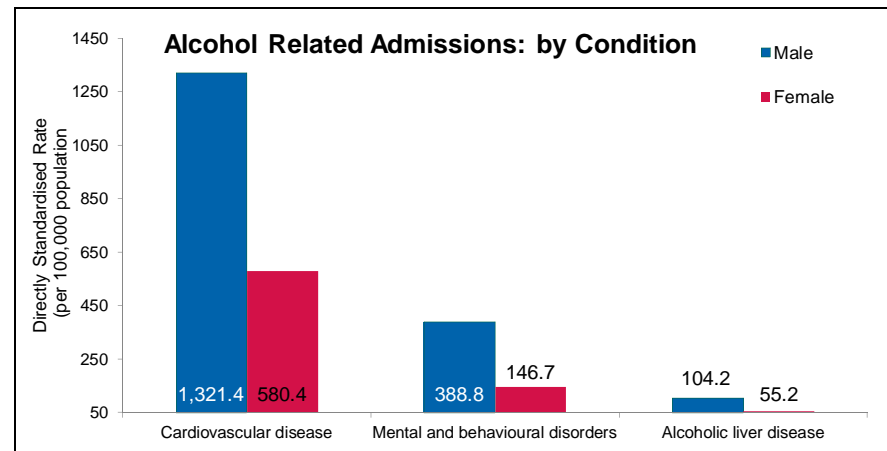
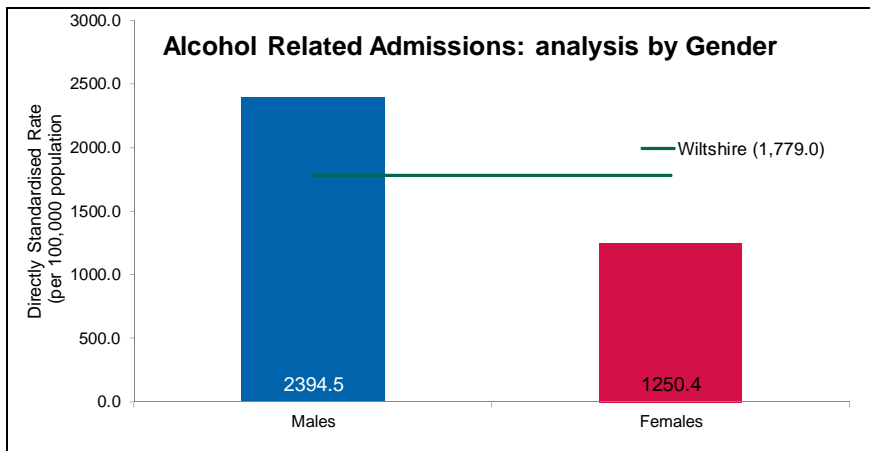
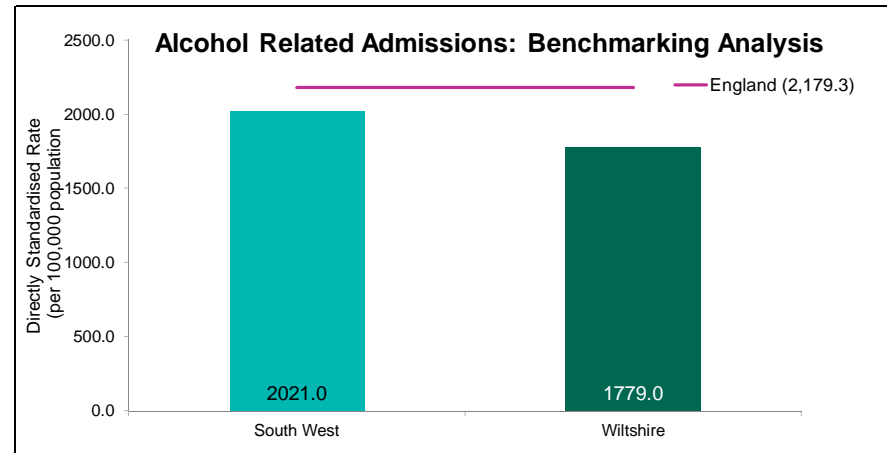
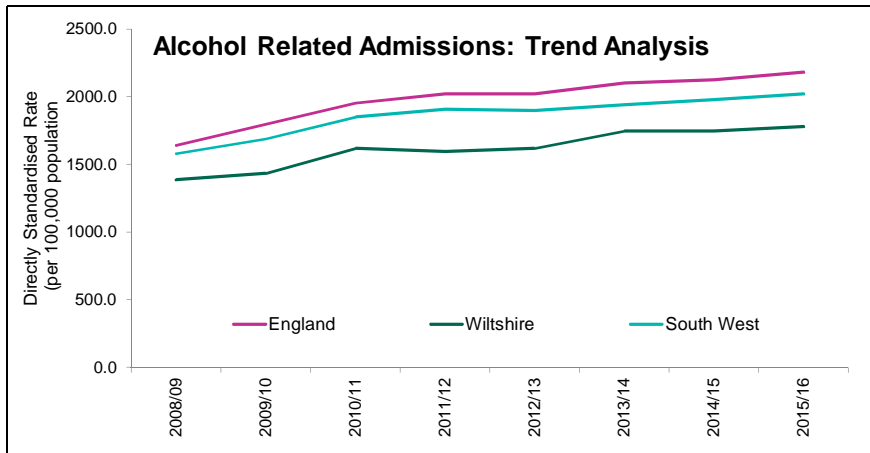


Between 2011 and 2014, Wiltshire had a higher rate of adults consuming over 14 units of alcohol per week than did England, the South West or our statistical neighbours. Similarly, in 2014, Wiltshire's volume of alcohol sold through the off-trade was higher than that of our comparators. There is a positive association between off-trade sales and alcohol-related hospital admissions at the local authority level.

Public Health England, Local Alcohol Profiles for England, indicator 17.01, Volume of pure alcohol sold through the off-trade: all alcohol sales; Public Health England, Local Alcohol Profiles for England, indicator 19.03, Percentage of adults drinking over 14 units of alcohol a week; MOSAIC Grand Index, Households with an above average likelihood of drinking at least once a day (Household types ABCF)

Alcohol Related Admissions (Broad)

Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually. Reducing alcohol-related harm is one of Public Health England's seven priorities for the next five years (from the "Evidence into action" report 2014). This analysis looks at admissions to hospital where the primary diagnosis or any of the secondary diagnoses are an alcohol-attributable code.

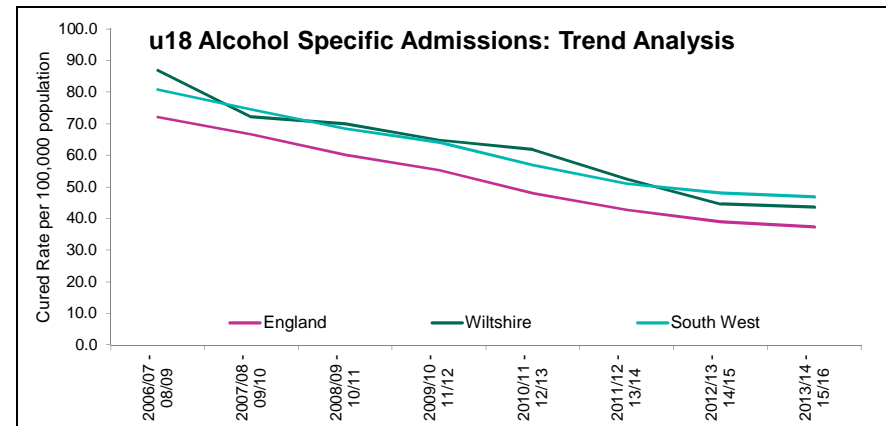
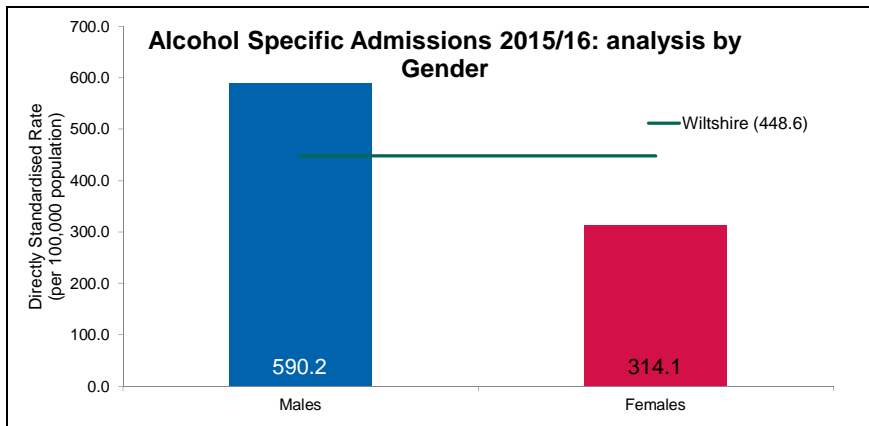
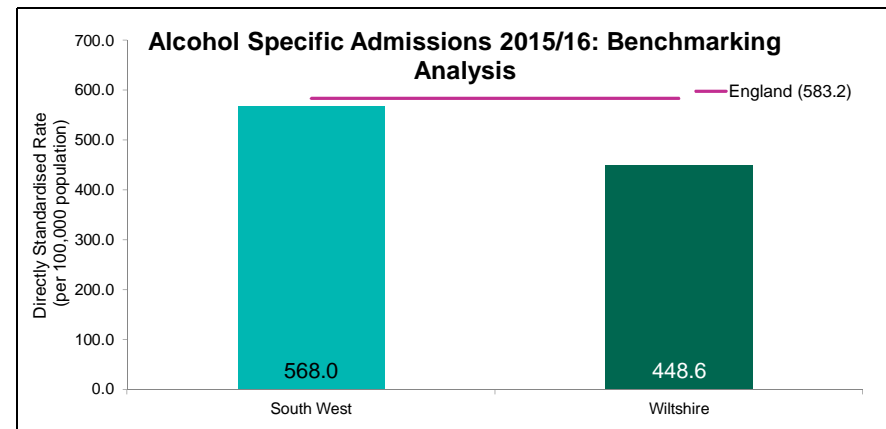
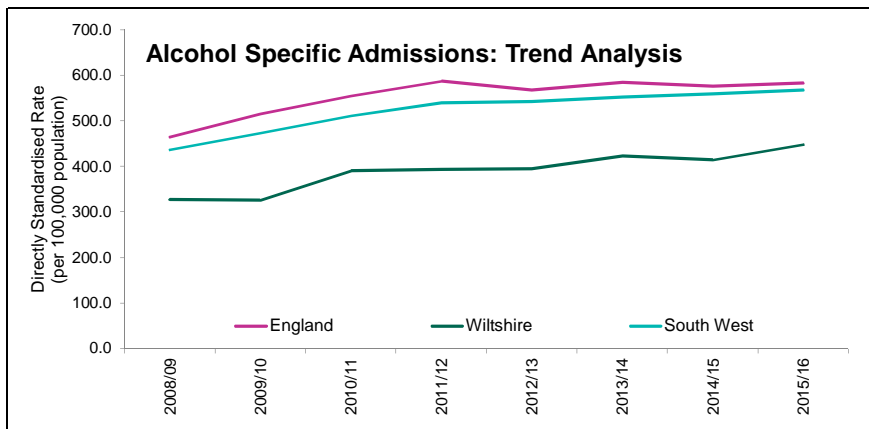


Wiltshire has a rate which is lower than the England and South West average but is rising faster than both the comparator areas. Males have a higher rate than than females.

Public Health England, Local Alcohol Profiles for England.

Alcohol Related Admissions (Specific)

Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually. Reducing alcohol-related harm is one of Public Health England's seven priorities for the next five years (from the "Evidence into action" report 2014). This analysis looks at admissions to hospital where the primary diagnosis or any of the secondary diagnoses are an alcohol-specific (wholly attributable) condition.

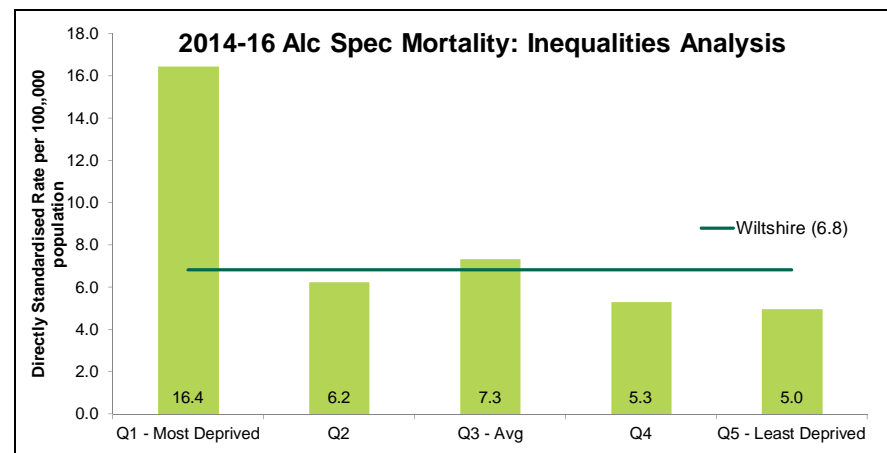
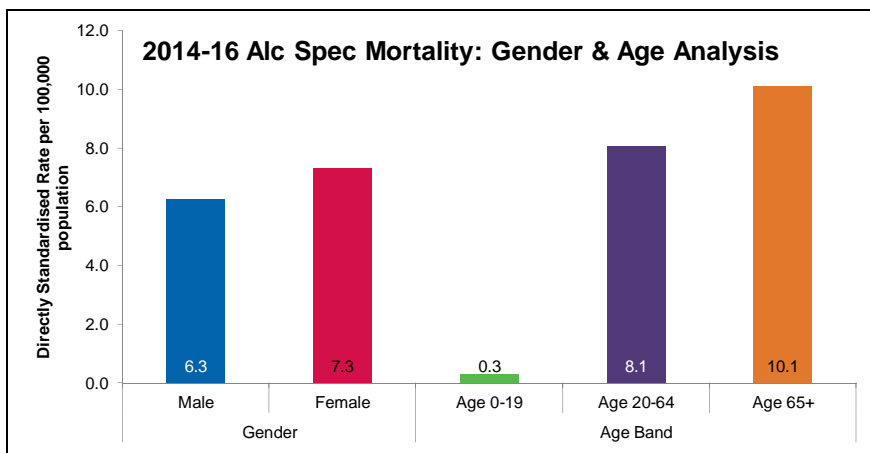
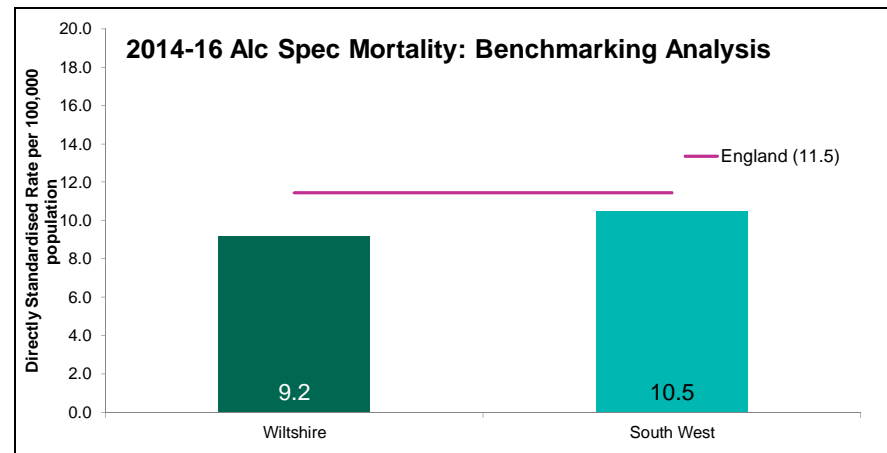
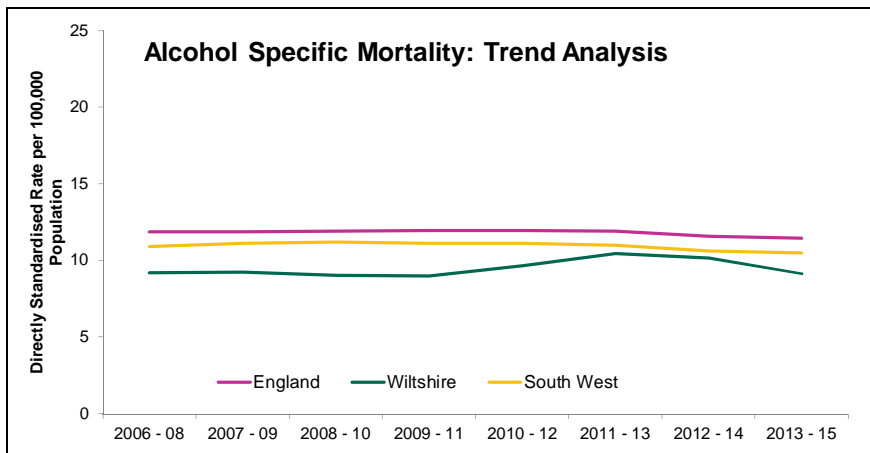


For all Ages Wiltshire has a rate lower than the England and South West averages, however for those aged under 18, the rate in Wiltshire is similar to the South West and higher than England. Males have a higher rate of admission than females.

Public Health England, Local Alcohol Profiles for England.

Alcohol Specific Mortality

Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. The Government has said that everyone has a role to play in reducing the harmful use of alcohol. This indicator is one of the key contributions by the Government (and the DH) to promote measurable, evidence based prevention activities at a local level, and supports the national ambitions to reduce harm set out in the Government's Alcohol Strategy.

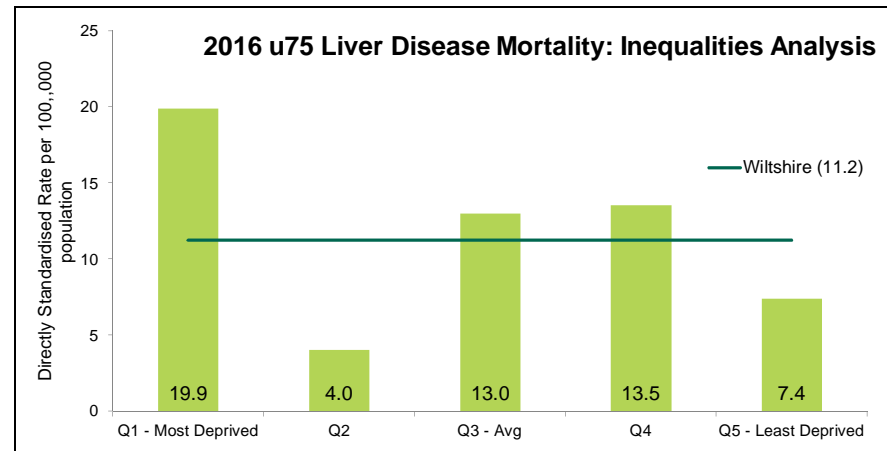
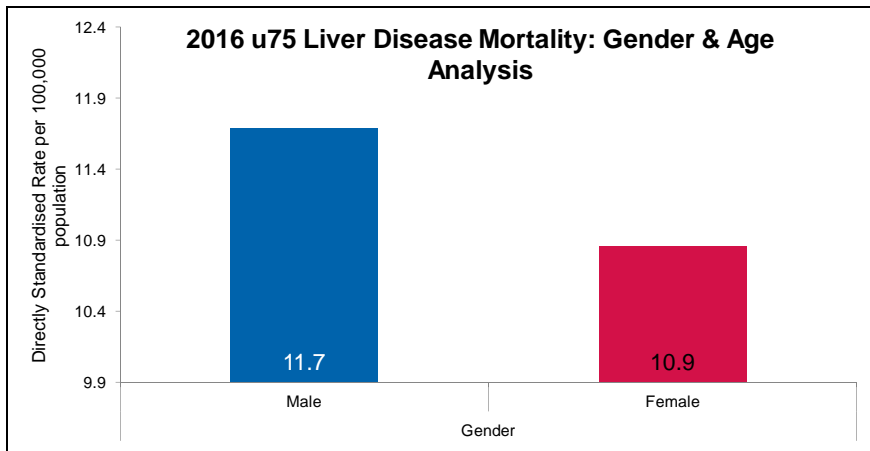
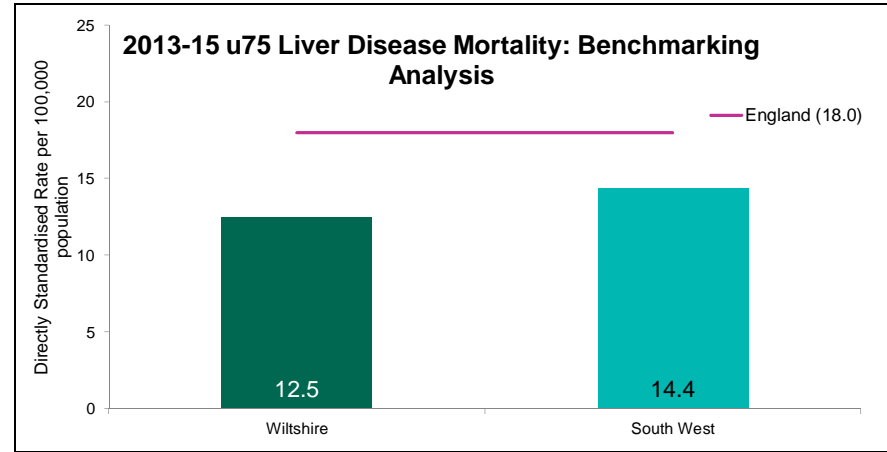
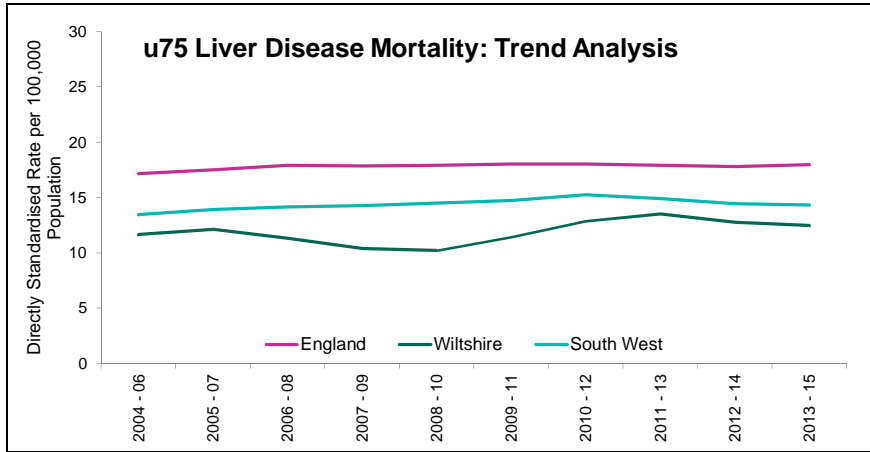


The Wiltshire rate for alcohol specific mortality is slightly lower than the England and South West averages. In Wiltshire females have a higher rate of mortality. Those living in the most deprived areas of Wiltshire have an alcohol specific mortality rate which is more than double those of the other parts of Wiltshire.

ONS Vital Statistics, Primary Care Mortality Database and ONS Population Mid Year Estimates.

Liver Disease Mortality in the under 75s

Liver disease is one of the top causes of death in England and people are dying from it at younger ages. Most liver disease is preventable and much is influenced by alcohol consumption and obesity prevalence, which are both amenable to public health interventions.

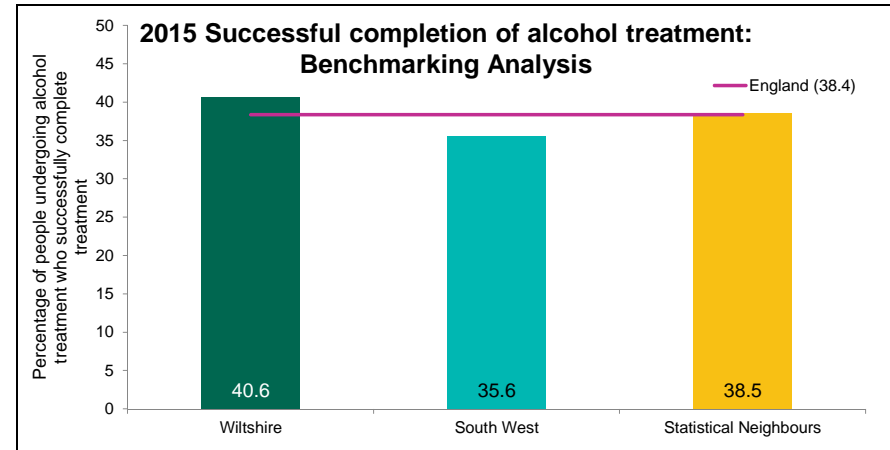
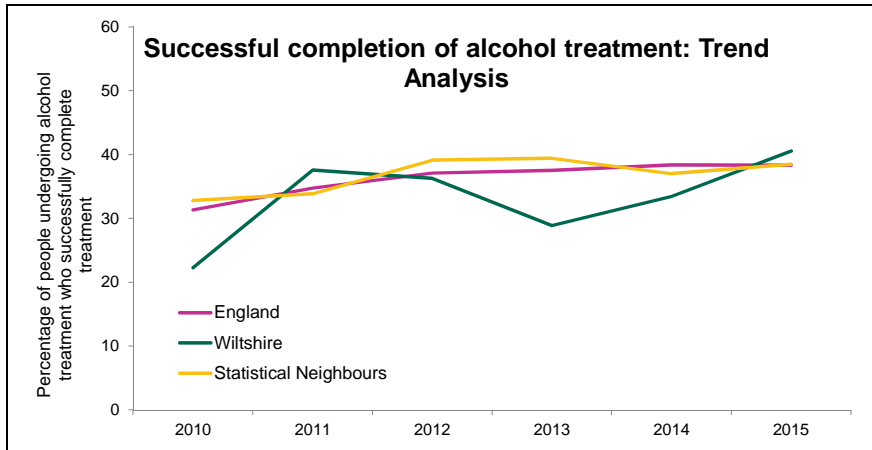


The Wiltshire rate for under 75 liver disease mortality is lower than the England and South West Average. Males in Wiltshire have a higher rate than females. Those living in the most deprived areas of Wiltshire have a higher rate than those living in other parts of Wiltshire.

ONS Vital Statistics, Primary Care Mortality Database and ONS Population Mid Year Estimates.

Successful Completion of Alcohol Treatment

In the United Kingdom, 1.6 million adults show signs of alcohol dependence with a further 9 million drinking at levels that increase the risk of harm to their health; with alcohol consumption being the 3rd biggest risk factor for illness and mortality (Public Health England). The Wiltshire Substance Misuse Service has been operational since 2013, providing integrated drug and alcohol treatment and support services for adults across Wiltshire. For more information, see the Adult Drug and Alcohol Treatment Needs Assessment 2015 - 2017 on www.intellicencenetwork.org.uk

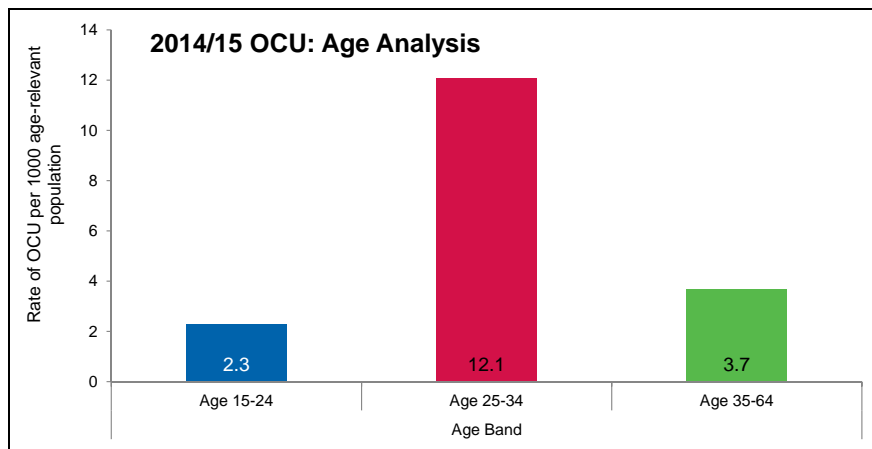
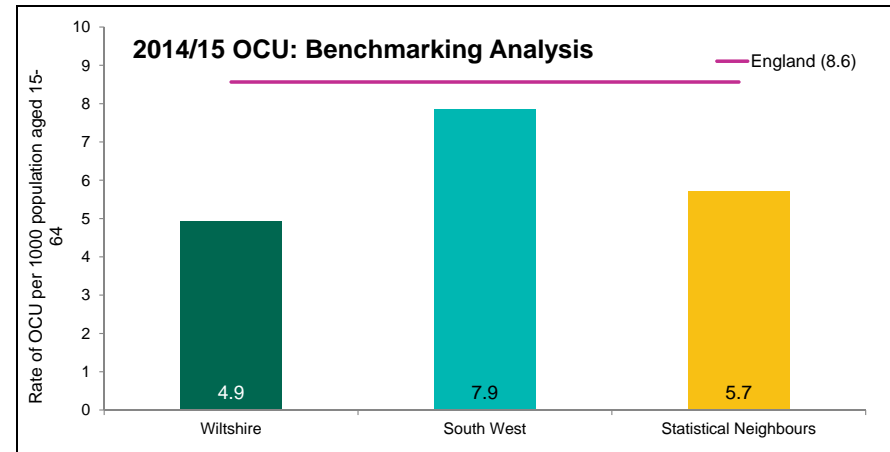
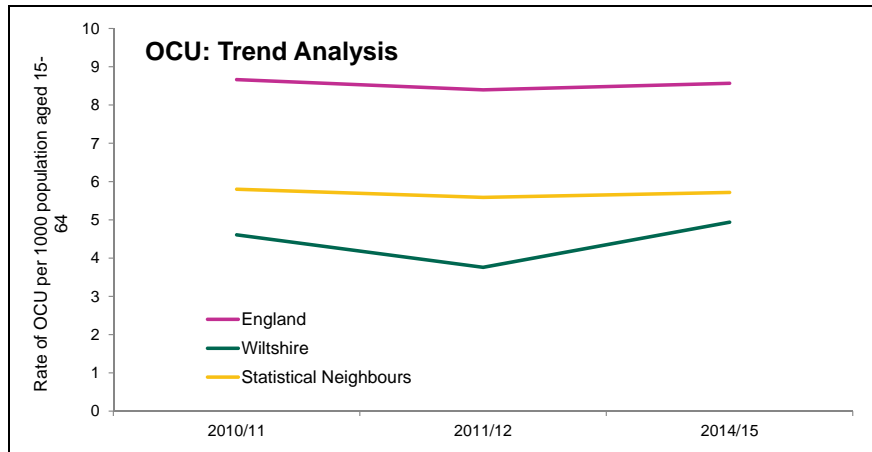


The percentage of alcohol users who left alcohol treatment successfully and did not re-present to treatment within 6 months has varied substantially over time in Wiltshire but since 2013 has risen from 28.9% to 40.6% in 2015. This represents 278 individuals in 2015. Wiltshire's 2015 percentage was higher than that of England (38.4%), the South West (35.6%) and our statistical neighbours (38.5%).

Public Health England, Public Health Outcomes Framework, indicator 2.15iii

Opiate and/or Crack Cocaine Use

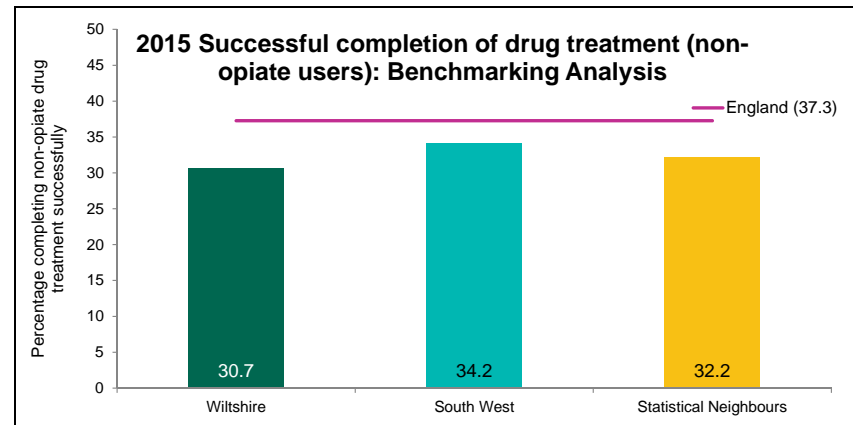
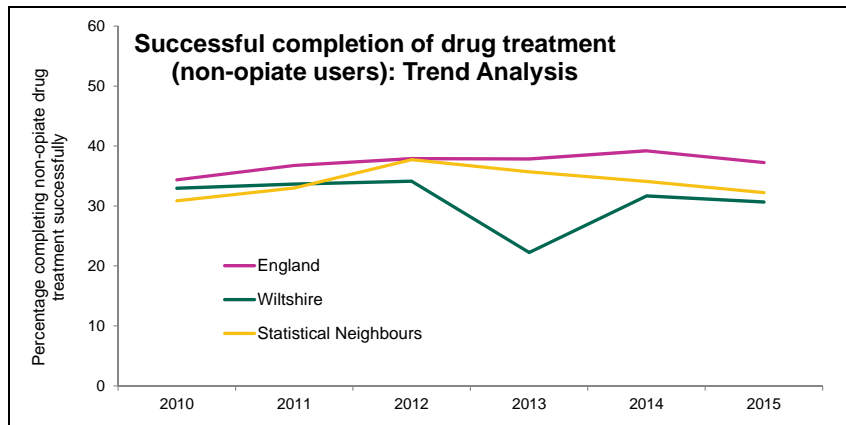
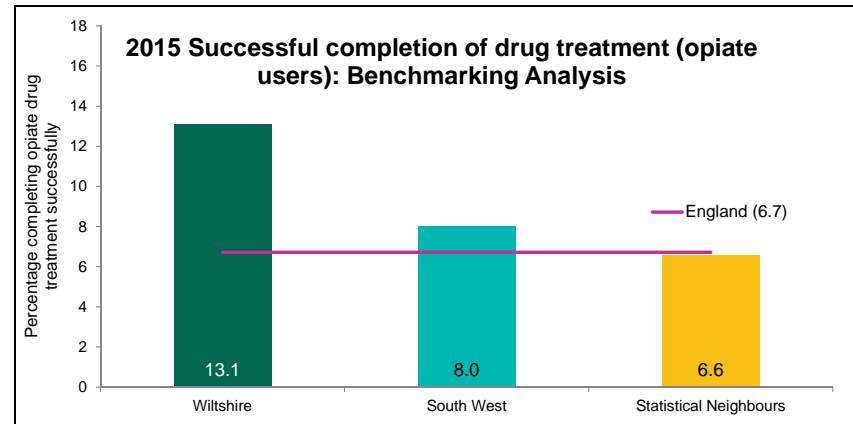
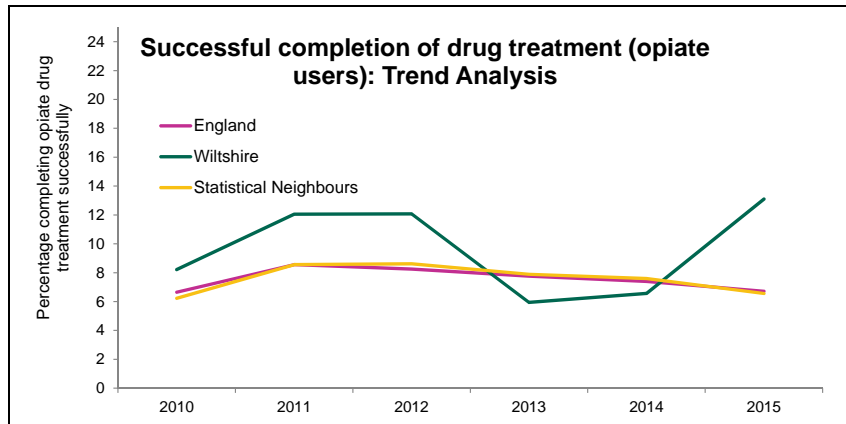
Opiate and crack cocaine use can have a devastating impact on individuals, their families and the wider community. Wiltshire Council's Community Safety Partnership (WCSP) oversees strategy and actions to reduce alcohol and drug related harms, alongside the commissioning and performance management of substance misuse treatment and care services in Wiltshire. For further information, see the Adult Drug and Alcohol Treatment Needs Assessment 2015 -2017 on www.intelligence-network.org.uk



Prevalence estimates indicate 4.9 per 1000 people aged 15-64 in Wiltshire used opiates and/or crack cocaine in 2014/15. This is significantly lower than the rates of use in England and the South West as a whole. In Wiltshire in 2014/15, rates of use were highest amongst those aged 25-34.

Successful Completion of Drug Treatment

Drug dependency can result in serious harm to individuals and the wider community. The Wiltshire Substance Misuse Service has been operational since 2013, providing integrated drug and alcohol treatment and support services for adults across Wiltshire. For more information, see the Adult Drug and Alcohol Treatment Needs Assessment 2015 -2017 on www.intelligenceenetwork.org.uk

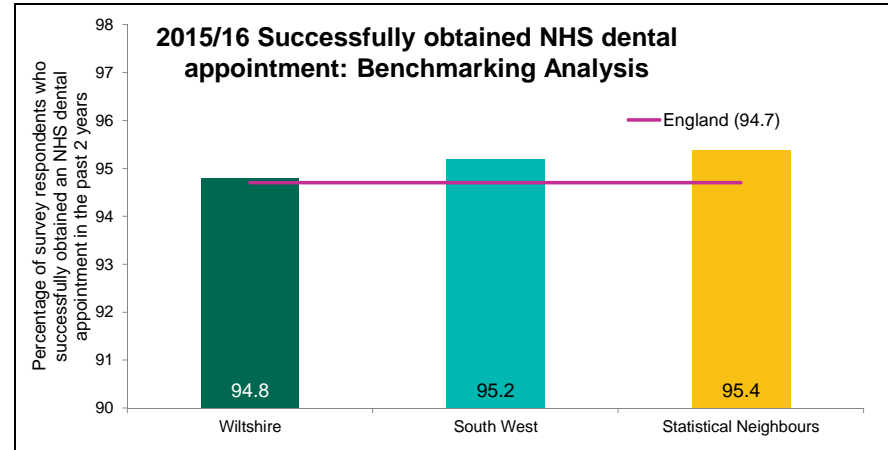
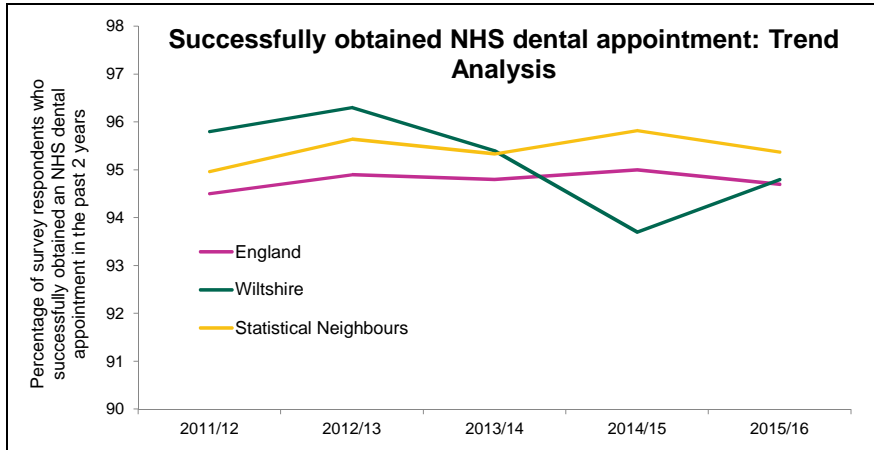


The percentage of opiate users who left treatment free of dependency and did not re-present to treatment within 6 months has varied over time in Wiltshire. In 2015, 13.1% of those in treatment (84 individuals) achieved this, a higher proportion than in England (6.7%), the South West (8%) and our statistical neighbours (6.6%). The percentage of non-opiate users completing treatment successfully and not re-presenting to treatment services within 6 months, however, was lower in Wiltshire in 2015 (30.7% / 111 individuals) than in our comparator areas.

Public Health England, Public Health Outcomes Framework, indicators 2.15i and 2.15ii

NHS Dental Care

Oral health is linked to a number of factors including socio-economic status. The availability of local NHS dental appointments is crucial in providing preventative dental care.

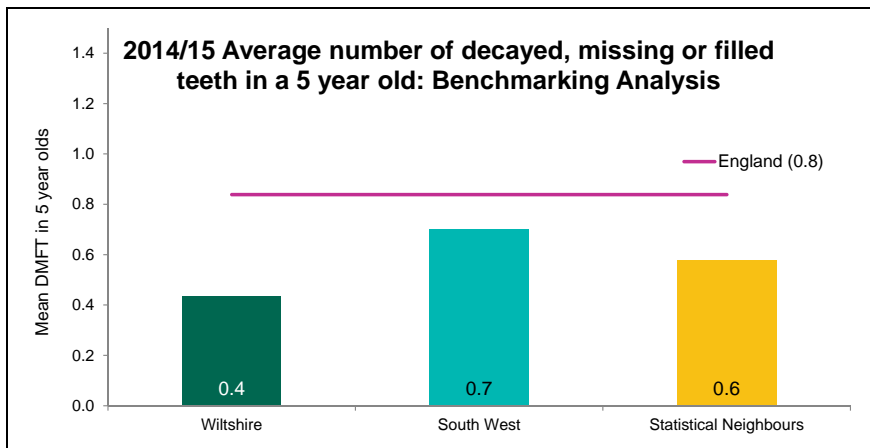
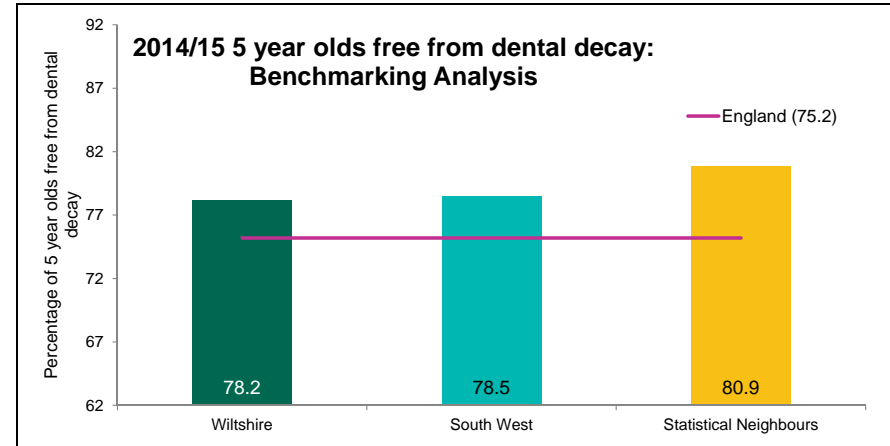
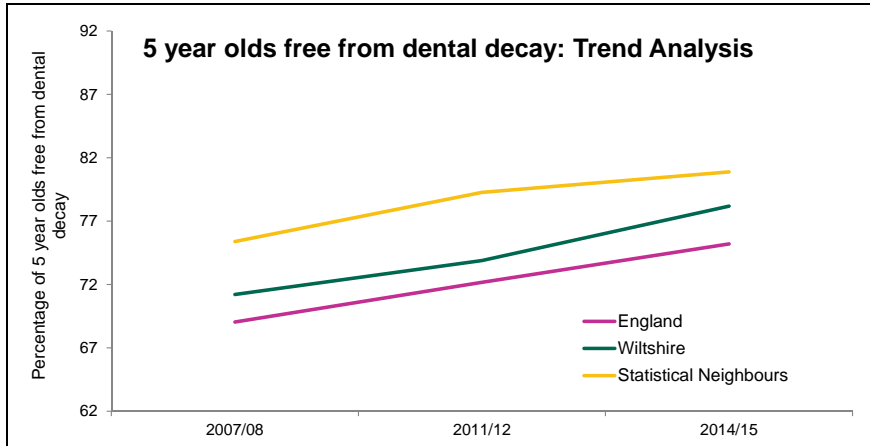


The weighted percentage of respondents to the Ipsos MORI GP Patient Survey who successfully obtained an NHS dental appointment, out of those who tried in the past two years, is a useful indicator for comparing the availability of services. Wiltshire's percentage rose, from a low of 93.7% in 2014/15, to 94.8% in 2015/16. This is very close to the England proportion of 94.7% but lower than that of the South West (95.2%) and our statistical neighbours (95.4%).

NHS Outcomes Framework - Indicator 4.4.ii from Ipsos MORI GP Patient Survey

Dental Decay in 5 year olds

Tooth decay is often preventable and can result in pain, loss of sleep and school absence, as well as in some cases requiring treatment under general anaesthetic (Public Health England).

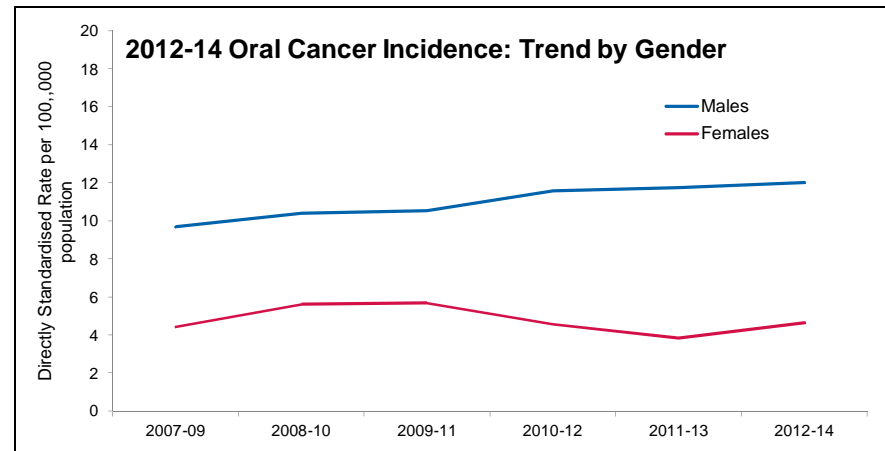
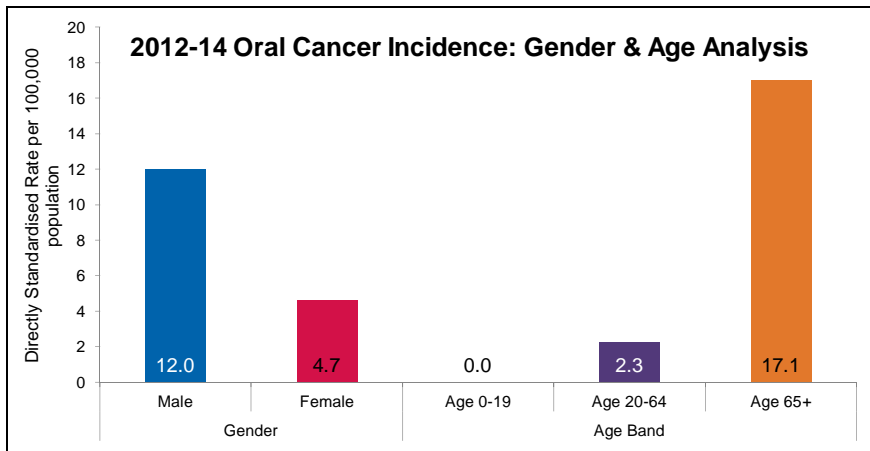
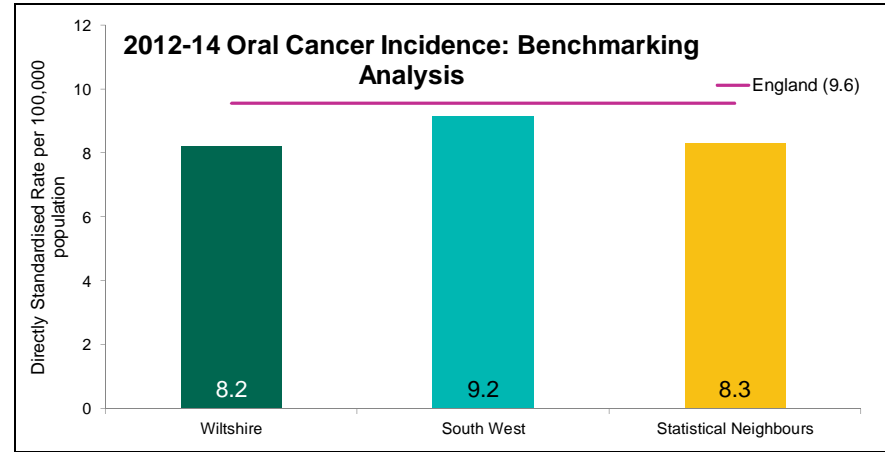
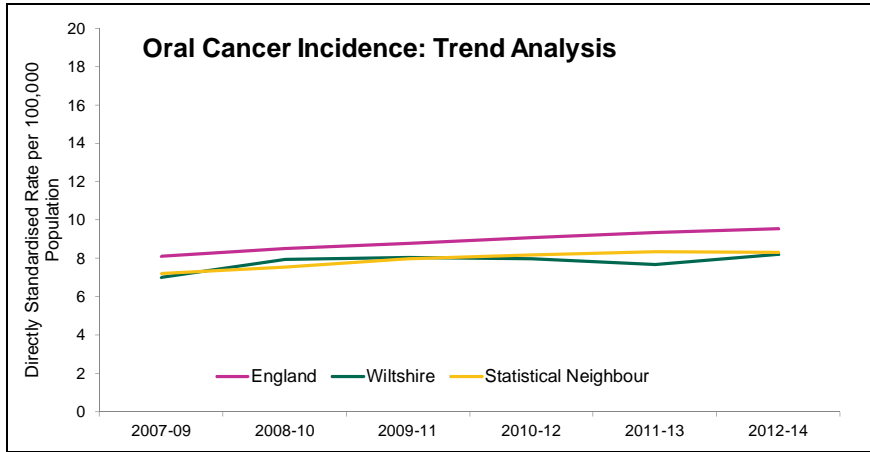


The proportion of 5 year olds free from dental decay in Wiltshire has risen from 71.2% in 2007/8 to 78.2% in 2014/15. This is higher than the England proportion (75.2%) and lower than that of our statistical neighbours (80.9%). Wiltshire's five year olds, however, have a lower average (mean) number of decayed, missing or filled teeth (0.4) than those of both England (0.8) and our statistical neighbours (0.6).

Public Health England, Oral Health Profile, indicators 4.02 and DMFT (decayed, missing or filled teeth) in five year olds.

Oral Cancer Incidence

Oral cancer, also known as mouth cancer, is where a tumour develops in the lining of the mouth. It may be on the surface of the tongue, the insides of the cheeks, the roof of the mouth (palate), or the lips or gums. Oral cancer is the sixth most common cancer in the world, but it's much less common in the UK.

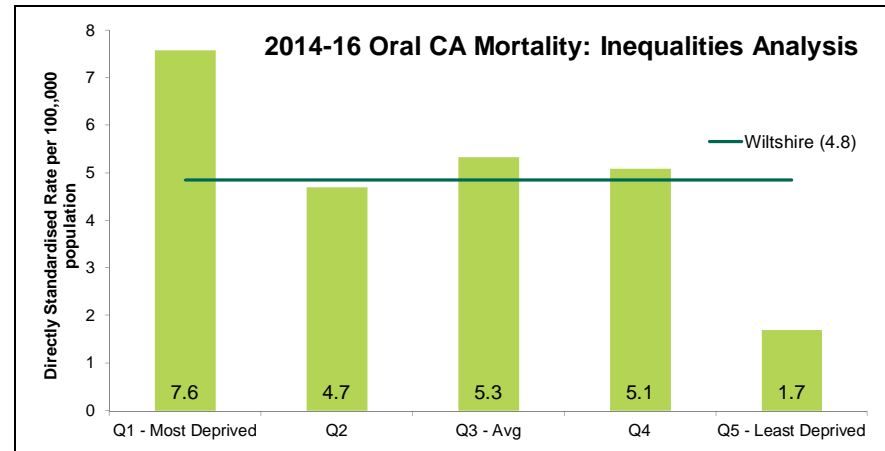
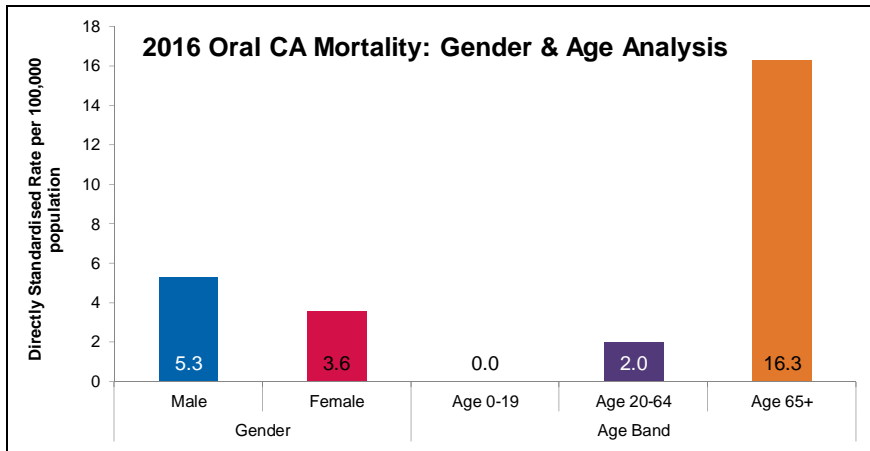
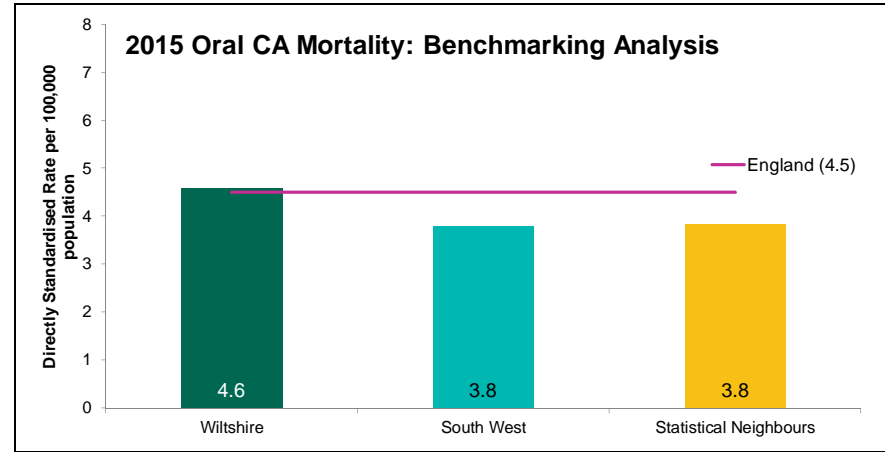
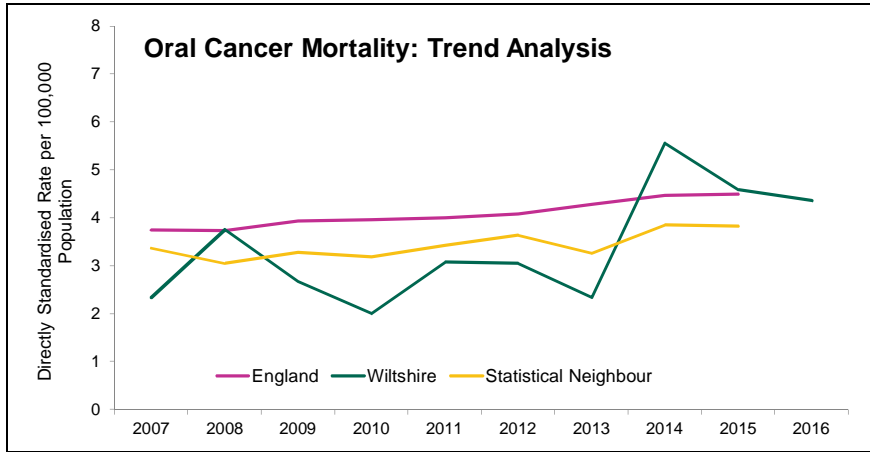


The incidence rate for oral cancer in Wiltshire is broadly similar to our Statistical Neighbours and England average. Males have a higher incidence rate which is continuing to rise, while the incidence rate for females has decreased resulting in a greater gap between men and women.

NCIN Cancer Statistics Data and ONS Population Mid Year Estimates.

Oral Cancer Mortality

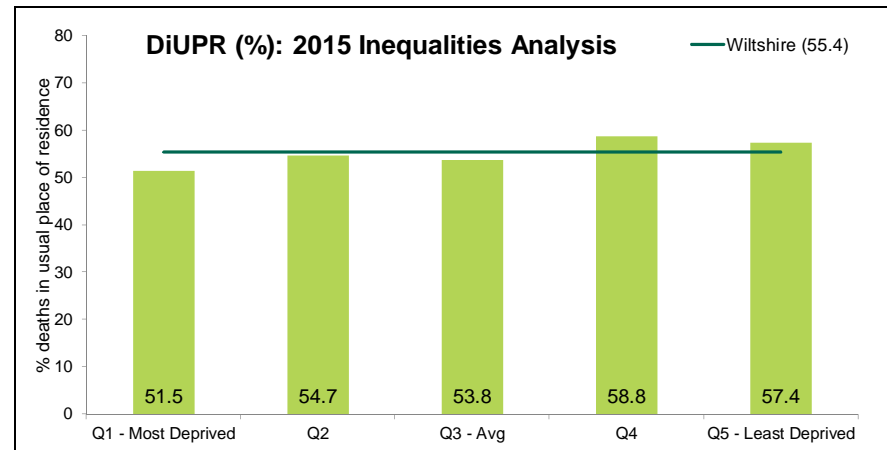
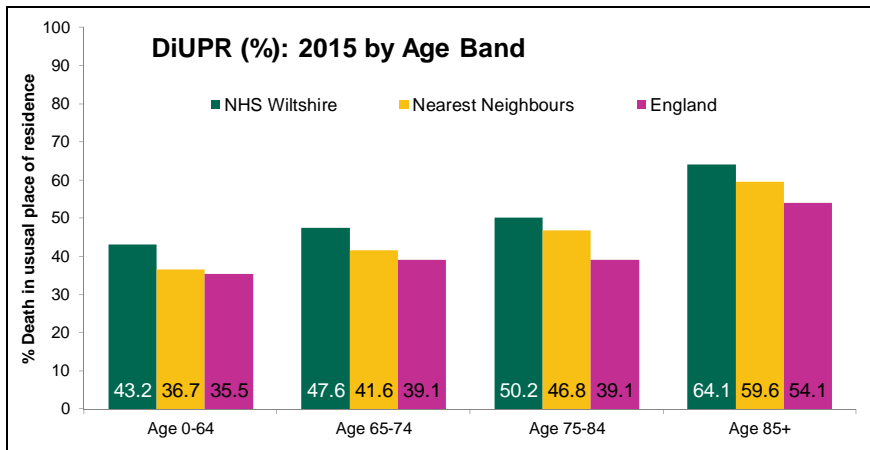
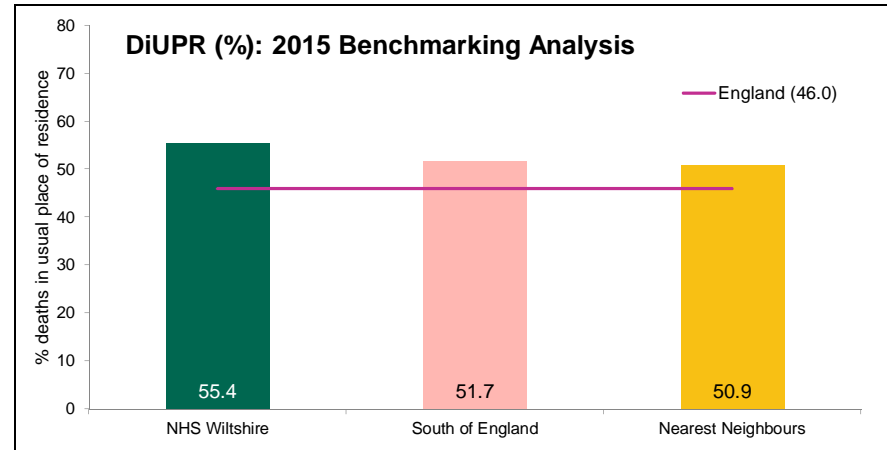
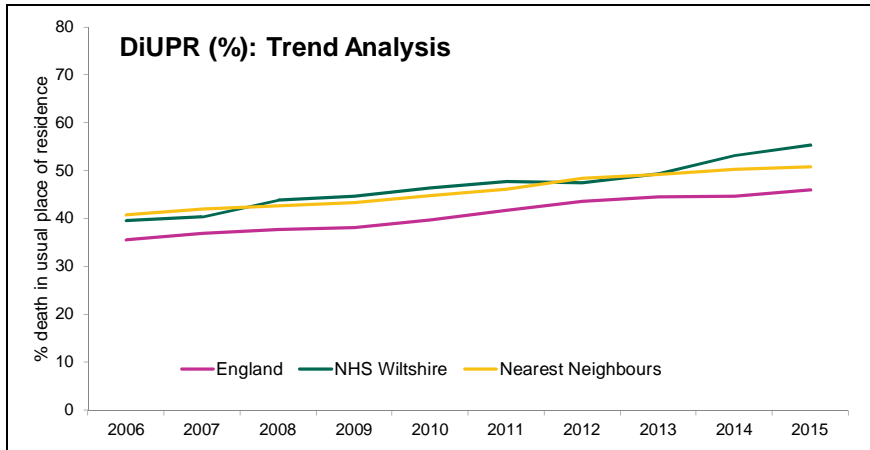
Oral cancer, also known as mouth cancer, is where a tumour develops in the lining of the mouth. It may be on the surface of the tongue, the insides of the cheeks, the roof of the mouth (palate), or the lips or gums. Mouth cancer is the sixth most common cancer in the world, but it's much less common in the UK.



The Wiltshire rate for Oral Cancer Mortality is broadly similar to the England average and slightly higher than the South West and our Statistical Neighbours average. The rate for Males in Wiltshire is more than double that for females. Those living in the most deprived areas of Wiltshire have a higher rate than those living in the most affluent areas of Wiltshire.

Deaths in Usual Place of Residence

The indicator deaths in usual place of residence is used to understand the trends and variations in place of death. This is seen as a proxy indicator for quality of end of life care.



The Wiltshire average has generally been higher than the England average and also our statistical neighbours, however it is not as high at the South West. There is some variation by deprivation with a marginally higher percentage in the more affluent areas of Wiltshire.